2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 28, 2008 08:00 AM Secretary of State

| ANNUAL REPORT | | | | | Secretary of St | | | |
|--|--|--|--|--|---|-------------------------------|---|--|
| 1. Entity Nam R & S F.U | RNITURE CORP. INC | | | | | ecreta | ry of St | |
| | e of Business HWY. 19 NORTH DINT, FL 34667 US | Mailing Address 12225 U.S. HWY. 19 NORTH BAYONET POINT, FL 34667 | US | ************************************** | pa in Andread Mail 2 * The Ref Ministration of the Ministration | alebber Tallegs, Sive | | |
| | O NOT WRITE | | | 02122008 | No Chg-P | CR2E034 (1 | | |
| | O NOT WRITE | IIV THIS SPA | UE . | 4. FEI Numbe 59-290 5. Certificate | | | Applied For Not Applicable 5 Additional lequired | |
| | 6. Name and Address of Current Re | anistered Agent | · · · · · · · · · · · · · · · · · · · | <u> </u> | ; | 1661 | equired | |
| 8. The above | AYR. HWY. 19 NORTH POINT, FL 34667 named entity submits this statement for tions of registered agent. | he purpose of changing its register | ed office or register | IN T | NOT WI | ACE | r with, and accept | |
| SIGNATURE_ | Signature, typed or printed name of registered agent and | d tille if applicable. (NOTE Registere | d Agent signature required | when reinstating) | | DATE | | |
| | E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00 | ncing \$5. | 00 May Be | | | | | |
| 10. | OFFICERS AND D | RECTORS | 44. | \$ 10 mg | ti de segui | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DP BABITT, RAY R. 5010 CAMBERLEY LANE OLDSMAR, FL | | | | 000000 05/21/08- |)929639 -80077 - 01 | 0 150.00 | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DP BABITT, RICHARD | | | | | | | |
| TITLE NAME STREET ADDRESS CITY-SI-ZIP | · | | And the second s | DO | NOT W | RITE | | |

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or suppliemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment under the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment under the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment under the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver of the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver of the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver of the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver of the same legal effect as if made under oath; that I am an officer or director of the corporation of

RAY BABITT

SIGNATURE:

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

ED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/08

Daytime Phone #