


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 10, 2006 8:00 am
Secretary of State

02-17-2006 90087 020 ***150.00

DOCUMENT # K50943 1. Entity Name CUSTOM MICA FURNITURE, INC.	
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Principal Place of Business 575 W 28TH ST HIALEAH, FL 33010 US	Mailing Address 575 W 28TH ST HIALEAH, FL 33010 US
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66004547



01262006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2921337	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent DORTA, GABINO 857 W 60 ST HIALEAH, FL 33012

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	PD DORTA, GABINO 857 W 60 ST HIALEAH, FL
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	SD DORTA, EDUARDO 843 W 60 ST HIALEAH, FL 33012
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	VD DORTA, MIRTA 857 W 60 ST HIALEAH, FL
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	TD DORTA, LUIS E 8020 NW 185 ST MIAMI, FL 33015
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	

**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 supplemental 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 with an address, with all other like empowered.

SIGNATURE: Mirta Dorta 3/3/06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #



ATTACHMENT

#66004547

FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 21, 2006

CUSTOM MICA FURNITURE, INC.
575 W 28TH ST
HIALEAH, FL 33010 US

Subject: CUSTOM MICA FURNITURE, INC.

Reference Number: K50943

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report **has not been filed** and a copy is being returned for the following correction(s):

The annual report/uniform business report must be signed by an officer or director of the corporation.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

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ANNUAL REPORTS SECTION