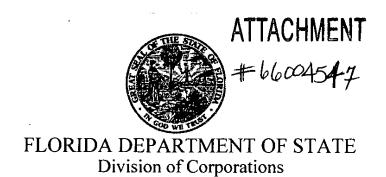
2006 FOR PROFIT CORPORATION ANNUAL REPORT

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

1. Entity Nam	MEN 1 # K50943 MICA FURNITURE, INC.			02-17-	-2006 90087 02	0 ***150.00
Principal Plac 575 W 28TH HIALEAH, FL	ST	Mailing Address 575 W 28TH ST HIALEAH, FL 33010 US			66004547	A ANNO RITORNO PERMON
D	O NOT WRITE	CE	01262006 No Chg- 4. FEI Number 59-2921337	.00		
DORTA, G 857 W 60 S HIALEAH,	ST	gistered Agent		DO NOT	WRITE	r 3 Additional Required
8. The above named entity submits this statement for the purpose of changing its registered office or retine obligations of registered agent. SIGNATURE Sometime, typed or protect name of registered agent and the 4 applicable. (NOTE: Registered Agent agent and the 4 applicable. (NOTE: Registered Agent agent and the 4 applicable. FILE NOWTH FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution.					of Florida. I em familia	ar with, and accept
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DI PD DORTA, GABINO 857 W 60 ST HIALEAH, FL	RÉCTORS		•		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD DORTA, EDUARDO 843 W 60 ST HIALEAH, FL 33012	•				
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	VD DORTA, MIRTA 857 W 60 ST HIALEAH, FL	المناسبة المساء	DO NOT WRITE			
NAME STREET ADDRESS CITY-SI-ZIP	DORTA, LUIS E 8020 NW 185 ST MIAMI, FL 33015	AND P		in i His ;	SPACE	
NAME STREET ADDRESS : CTY-ST-ZIP		-				
NAME STREET ADDRESS CITY-ST-ZP	ertify that the information supplied with th	s filing does not qualify for the exi	emptions contained	in Chapter 119, Florida Statut	tes. I further certify tha	it 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 only; 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 approvered. SIGNATURE: SIGNATURE AND TYPED OR PRINTED MANIE OF SIGNING OFFICER OR DIRECTOR Days Trope 9						



February 21, 2006

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

Subject: CUSTOM MICA FURNITURE, INC.

K50943

Reference Number: (

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report <u>has not been filed</u> 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.

/JE ANNUAL REPORTS SECTION