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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K70827

(6)

FLORIDA FLAIR FURNITURE, INC.

Principal Place of Business	Mailing Address
3630 BONITA BEACH ROAD BONITA SPRINGS FL 34134	3630 BONITA BEACH ROAD BONITA SPRINGS FL 34134

## FILED Jan 30 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/07/1989 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0099540 21 26 Not Applicable Suite, Apt. #, etc. Suite. Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 28 Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 ☐ Yes 25 29 30 Personal Property Tax due June 30. □ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 KELLER, WAYNE P. 3630 BONITA BEACH ROAD 82 Street Address (P.O. Box Number is Not Acceptable) BONITA SPRINGS FL 33923 83 84 City 85 Zip Code FL 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agant and little if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change Addition DΡ 1.1 TITLE TUTLE KELLER, WAYNE P. 1.2 NAME NAME 32E034 26935 MCLAUGHLIN BLVD 1.3 STREET ADDRESS STREET ADDRESS **BONITA SPRINGS FL** 1.4 CITY - ST- ZIP CITY-ST-ZIP DELETE Change Addition TITLE DST 2.1 TITLE KELLER, PAMELA 2.2 NAME NAME 26935 MCLAUGHLIN BLVD 2.3 STREET ADDRESS STREET ADDRESS **BONITA SPRINGS FL** 2. 4 CITY - ST- ZIP CITY - ST - ZIP DELETE Change Addition TITLE 31 TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY - ST - ZIP CITY-ST-ZIF DELETE Change Addition TITLE 4.1 TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY - ST - ZIP DELETE Change Addition TITLE 6.1 TITLE

14. I hereby certify that the Information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes, I further certify that the information indicated on this annual report or supplemental annual 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 cytrus/see empowered to execute this report as required by Chapter 607, Florida Statutes, I further certify that the information indicated on this annual report or supplemental annual report or supplemental annual report or supplemental annual report of the corporation or the receiver cytrus/see empowered to execute this report as required by Chapter 607, Florida Statutes, I further certify that the information indicated on this annual report or supplemental annual report or suppl

6.2 NAME

6.3 STREET ADDRESS

SIGNATURE:

NAME

STREET ADDRESS

Verne & Kella to Herident

14.98

941-992-4321