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1996 JUN -5 AM 11:06

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



PROFIT CORPORATION  
ANNUAL REPORT  
1996

FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # L51689 (2)

1. Corporation Name  
OCEAN FURNISHINGS INC.

Principal Place of Business  
1417 SW 1ST AVE  
FT LAUDERDALE FL 33315  
US

Mailing Address  
1417 SW 1ST AVE  
FORT LAUDERDALE FL 33315  
US

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

3. Date Incorporated or Qualified  
02/15/1990

3a. Date of Last Report  
07/25/1995

4. FEI Number  
65-0171264

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

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

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ROBERTO X EUGENE  
901 SW 12 COURT  
SUITE 15 XXXXX  
FORT LAUDERDALE FL 33316X

81 Name  
Corporation Service Company

82 Street Address (P.O. Box Number is Not Acceptable)  
1201 Hays Street

83

84 Tallahassee

FL 85 Zip Code  
32301

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]*

(Print Name of Registered Agent) *[Signature]*

(Date) *6-4-96*

12. OFFICERS AND DIRECTORS

TITLE D  
NAME NICHOLS, JAMES ANDREW  
STREET ADDRESS 29-31 CITY INDUS. PARK  
CITY-ST-ZIP SOUTHAMPTON, ENGLAND

TITLE VSD  
NAME WHICHER, DIANE MARY  
STREET ADDRESS 29-31 CITY INDUS. PARK  
CITY-ST-ZIP SOUTHAMPTON, ENGLAND

TITLE XXXXXXXXXXXXXXXX  
NAME ROBERTO, EUGENE XX  
STREET ADDRESS 901 SW 12 COURT  
CITY-ST-ZIP FORT LAUDERDALE FL

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *[Signature]*  
DIANE MARY WHICHER, Vice President

5/29/96

764-3779

Daytime Phone #

CR2E034 (12/95)