

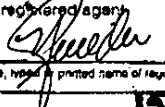
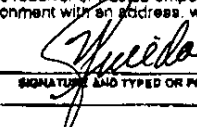
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OSCAR DURANZA

FILED
Aug 01, 2005 8:00 am
Secretary of State

08-01-2005 90025 043 ***158.75

**2005 FOR PROFIT CORPORATION
 ANNUAL REPORT**

DOCUMENT # P00000009063			
1. Entity Name CUSTOM DESIGNED FURNITURE INC.			
Principal Place of Business 9506 SO. RED ROAD MIAMI, FL 33156		Mailing Address 9506 SO. RED ROAD MIAMI, FL 33156	
2. Principal Place of Business 7417 N.W. 7 Street Suite, Apt. #, etc.		3. Mailing Address 7417 N.W. 7 Street Suite, Apt. #, etc.	
City & State MIAMI, FL		City & State MIAMI, FL	
Zip 33126	Country U.S.	Zip 33126	Country U.S.
4. FEI Number 65-0877869		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required		07282005 Chg-P CR2E034 (10/03)	
6. Name and Address of Current Registered Agent OESTERLE, DOUGLAS W 9506 SO. RED ROAD MIAMI, FL 33156		7. Name and Address of New Registered Agent Name Noel Pineda Street Address (P.O. Box Number is Not Acceptable) 7417 N.W. 7 Street City MIAMI FL Zip Code 33126	
8. This 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 		SIGNATURE Noel Pineda DATE 7-28-05	
FILE NOW!! FEE IS \$100.00 Due by September 7, 2005		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D CASTRO, CARLOS M. 9506 SO. RED ROAD MIAMI, FL 33156 ☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D PINEDA, NOEL 9506 SO. RED ROAD MIAMI, FL 33156 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
12. 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 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 807, Florida Statutes; and that my name appears in Block 10 or Block 11 changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: 		SIGNATURE Noel Pineda DATE 7-28-05 305-261-5163	