

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000028610

FILED
Mar 21, 2009
Secretary of State

Entity Name: FLORIDA FURNITURE EXPRESS, INC.

Current Principal Place of Business:

460 NORTH ARBOLEDA STREET
CLEWISTON, FL 33440 US

New Principal Place of Business:

Current Mailing Address:

460 NORTH ARBOLEDA STREET
CLEWISTON, FL 33440 US

New Mailing Address:

FEI Number: 65-0992658

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HERNANDEZ, ILIANA PD,VP
460 NORTH ARBOLEDA STREET
CLEWISTON, FL 33440 US

Name and Address of New Registered Agent:

HERNANDEZ, ANGEL PD, TR
460 NORTH ARBOLEDA STREET
CLEWISTON, FL 33440 US

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.

SIGNATURE: ANGEL HERNANDEZ

03/21/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HERNANDEZ, ILIANA PD,VP
Address: 460 NORTH ARBOLEDA STREET
City-St-Zip: CLEWISTON, FL 33440 US

Title: SEC () Delete
Name: HERNANDEZ, ILIANA SEC, TR
Address: 460 NORTH ARBOLEDA STREET
City-St-Zip: CLEWISTON, FL 33440 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: HERNANDEZ, ANGEL PD,TR
Address: 460 NORTH ARBOLEDA STREET
City-St-Zip: CLEWISTON, FL 33440 US

Title: VP (X) Change () Addition
Name: HERNANDEZ, ILIANA VP, SEC
Address: 460 NORTH ARBOLEDA STREET
City-St-Zip: CLEWISTON, FL 33440 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ILIANA HERNANDEZ

VP

03/21/2009

Electronic Signature of Signing Officer or Director

Date