PS 192

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
04 JUN -3 PM 2:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P00000103528

1. Entity Name
Gedeon Upholstery, Inc

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
367 NE 79th St.
Suite, Apt. #, etc.
City & State
Miami, Fl.
Zip 33138 Country US

3. Mailing Address
Same
Suite, Apt. #, etc.
City & State
Zip Country

DO NOT WRITE IN THIS SPACE

4. FEI Number 651055881 ☐ Applied For ☐ Not Applicable

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

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent
Name Michelet Petit
Street Address (P.O. Box Number is Not Acceptable)
367 NE 79th st.
City Miami FL Zip Code 33138

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Michelet Petit
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

January 1 - May 1 Fee is $150.00
After May 1 Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

TITLE	President
NAME	Michelet Petit
STREET ADDRESS	367 NE 79th street.
CITY-ST-ZIP	Miami, Fl. 33138
TITLE	Vice-President
NAME	Catherine Elysee
STREET ADDRESS	367 NE 79 street
CITY-ST-ZIP	Miami, Fl 33138
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

100037798491
06/09/04--01029--029 **600.00

DO NOT WRITE IN THIS SPACE

CR2E034B (12/02)

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 607, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: Michelet Petit
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

19292

Division of Corporations
P.O. BOX 6327
Tallahassee, FL 32314

Per instructions from Division of Corporations, I am attaching a check in the amount of $150.00 for the annual report fee with my application.

We did not receive the U.B.R. for the years 2004 or any other notice from the Division of Corporations in respect with the Corporation **GEDEON UPHOLSTERY, INC.**
Thank you for your courtesy in this matter.

Michelet Petit

MICHELET PETIT
PRESIDENT