

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Aug 26, 2004 8:00 am**  
**Secretary of State**

08-26-2004 90002 034 \*\*\*550.00

**DOCUMENT # P01000009752**

1. Entity Name

DREAM HOME FURNISHINGS, INC.



Principal Place of Business

1264 S JOHN YOUNG PARKWAY  
KISSIMMEE FL 34741

Mailing Address

1264 S JOHN YOUNG PARKWAY  
KISSIMMEE FL 34741

2. Principal Place of Business

223 S. John Young Pkwy  
Suite, Apt. #, etc.

3. Mailing Address

223 S. John Young Pkwy  
Suite, Apt. #, etc.



MOORE

CR2E034 (11/03)

City & State

Kissimmee FL 34741

Zip  
34741

Country

OSCEOLA

City & State

Kissimmee FL

Zip  
34741

Country

OSCEOLA

4. FEI Number

59-3694127

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

ARCHER, BRIAN  
1248 S JOHN YOUNG PARKWAY  
KISSIMMEE FL 34741

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when re-registering)

DATE

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2004 Fee will be \$550.00**

**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 D ☐ Delete  
NAME ARCHER, BRIAN  
STREET ADDRESS 1232 S JOHN YOUNG PKWY  
CITY-ST-ZIP KISSIMMEE FL 34741

TITLE D ☐ Delete  
NAME TATMAN, LYN CLAYTON  
STREET ADDRESS 753 DROMEDARY DRIVE  
CITY-ST-ZIP KISSIMMEE FL 34759

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☒ Change ☐ Addition  
NAME BRYAN ARCHER  
STREET ADDRESS 223 S. JOHN YOUNG PKWY  
CITY-ST-ZIP KISSIMMEE FL 34741

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Lyn Tatman / LYN TATMAN

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/23/04

Date

407 709 6931

Daytime Phone #