

**2003 FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Aug 04, 2003 8:00 am**  
**Secretary of State**

08-04-2003 90154 034 \*\*\*150.00

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**DOCUMENT # P01000010497**

1. Entity Name  
**FURNITURE NOW INC.**



Principal Place of Business  
**509 W BRANDON BLVD  
BRANDON FL 33511**

Mailing Address  
**509 W BRANDON BLVD  
BRANDON FL 33511**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **74-3031621**

Applied For  
Not Applicable

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

☐ CHECK HERE IF MAKING CHANGES

**6. Name and Address of Current Registered Agent**

**LAFauci, GEORGE  
509 W BRANDON BLVD  
BRANDON FL 33511**

**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 reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$550.00  
After September 10, 2003 Fee will be \$750.00  
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	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
	<b>D LAFauci, GEORGE</b>	<b>29 NORTON AVE.</b>	<b>PT. JEFFERSON NY 11777</b>	
				<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/> Change	<input type="checkbox"/> 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 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:**

**SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*pres.*

*7/27/03*

*813-643-9949*

Date

Daytime Phone #

CR2E034 (4/03)

Attachment

80135967  
#D01000010497

HOME  
**ACCESSORY**  
CENTER  
by FURNITURE NOW

Division of Corporations  
~~Uniform Business Filings~~  
PO Box 1500  
Tallahassee, FL 32302-1500

July 27, 2003

Furniture Now  
George LaFauci  
509 W. Brandon Blvd.  
Brandon, FL 33511  
1-813-643-9949

To Whom It May Concern:

Please be advised that this was our first notice we received regarding this matter. We recently had a change of address and are not sure if this is the reason we did not receive prior notice, therefore we request that the penalty be waived. Enclosed is the original \$150.00 fee. If there are any questions regarding this matter please contact me at the above number.  
Thank you.

Sincerely,



George A. LaFauci  
President