FOR PROFIT CORPORATION WINESS REPORT (UBR)

PARADA

DOCUMENT # P01000042743 1. Entity Name 02 SEP 13 PM 2:57 TREND FURNITURE BY DESIGN, INC... DO NOT WRITE IN THIS SPACE 2. Principal Place of Business 1720 HARRISON STREET 1720 HARRISON STREET Suite, Apt. #, etc. #10-B Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE #10-B Applied For 4. FEI Number City & State HOLLYWOOD, FL HOLLYWOOD, FL Not Applicable Zip 33020 \$8.75 Additional Country Country Certificate of Status Desired 33020 Fee Required 7. Name and Address of Current Registered Agent SHAWN F. RAD DO NOT WRITE Street Address (P.O. Box Number is Not Acceptable) IN THIS SPACE 1720 HARRISON STREET #10-B City HOLLYWOOD 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. (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. January 1 - May 1 Fee is \$150.00 9. This corporation is eligible to satisfy its Intangible After May 1, Fee is \$550.00 Amended UBR is \$61.25 Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so: Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 11. TITLE THE (PSTD) SHAWN F. RAD NAME NAME 1720 HARRISON ST. #10-B STREET ADDRESS STREET ADDRESS HOLLYWOOD: FL: 33020 CITY ST 7IP CITY-ST-7IP TITLE LHE: NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TIT F NAME NAME STREET ADDRESS STREET ADDRESS DO NOT WRITE CITY-ST-ZIP CITY-ST- BP TITLE IN THIS SPACE TITLE NAWE NAME STREET ADDRESS STREET ADDRESS CITY ST. 7IP CITY-ST-ZIP **800007808768--3** BILE -09,/17,/02--01070--01D NAME NAME

13. I hereby certify that the information supplied with this filling 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 accurace 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 11 or on an attachment with an address, with all other like empowered.

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-789

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

NAME STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

####500.00 ****150.00

TREND FURNITURE BY DESIGN, INC. DOC. # P01000042743



TO: DIVISION OF CORPORATION P.O. BOX 6327
TALLAHASSEE, FL 32314

TO WHOM IT MAY CONCERN:

AS RER YOUR INSTRUCTIONS, ENCLOSED YOU WILL FIND THE ANNUAL REPORT FORM ALONG WITH A CHECK PAYABLE TO THE FLORIDA DEPARTMENT OF STATE TO PROPERLY UP-DATE THE ABOVE MENTIONED CORPORATION.

I NEVER RECEIVED ANY NOTICE FROM YOUR OFFICE OF SUCH REPORT. PLEASE TAKE THIS LETTER AS AN EXCUSE TO PUT THIS CORPORATION IN ITS CURRENT STATUS AND WAIVE ANY LATE FEES.

THANK YOU IN ADVANCE FOR YOUR PROMPT ATTENTION IN THIS MATTER AND IF YOU SHOULD HAVE ANY QUESTION REGARDING THIS LETTER DON'T HESITATE TO CONTACT ME.

CORDIALLY

PRESIDENT