FILED
Apr 23, 2003 8:00 am
Secretary of State

04-23-2003 90304 048 ***150.00

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **P01000065581**

1. Entity Name
ARCHIWOOD FURNITURE, INC.

Principal Place of Business	Mailing Address
96 NE 40 ST MIAMI, FL 33137	5825 COLLINS AVENUE UNIT 4C MIAMI BEACH, FL 33140

2. Principal Place of Business		3. Mailing Address	
346 Miracle Mile		2555 Collins Ave	
Suite, Apt. #, etc.		Suite, Apt. #, etc. #305	
City & State Coral Gables - FL		City & State Miami Beach - Fl	
Zip 33134	Country USA	Zip 33140	Country USA

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **65-1103379** ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
BERNSTEIN, ROGER A 2875 N.E. 191ST STREET SUITE #500 AVENTURA, FL 33180	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 $150.00
After May 1, 2003 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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PS JEZIOR, ALDO 5825 COLLINS AVENUE, UNIT #4C MIAMI BEACH, FL 33140	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	2555 Collins Ave #305 Miami Beach - Fl 33140	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V ASENJO DE JEZIOR, ALICIA A 5825 COLLINS AVENUE, UNIT #4C MIAMI BEACH, FL 33140	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	2555 Collins Ave #305 Miami Beach - Fl 33140	☒ Change ☐ Addition
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CR2E034 (10/02)

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

SIGNATURE: [signature] 4/21/03 (305) 774-1818
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #