2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

Jul 11, 2006 8:00 am Secretary of State 07-11-2006 90016 030 ***150.00 DOCUMENT # P01000100110 FERNANDO'S FURNITURES, INC. 40098221 Principal Place of Business Mailing Address 7305 NW 61ST STREET 7305 NW 61ST STREET MIAMI, FL 33166 MIAMI, FL 33166 07062006 No Chg-P CR2E034 (11/05) **DO NOT WRITE IN THIS SPACE** 4. FEI Number Applied For 65-1145552 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent LONDONO, NESTOR O DO NOT WRITE 12815 SW 116 STREET MIAMI, FL 33186 IN THIS SPACE 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/amiliar with, and accept the obligations of registered open (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Trust Fund Contribution. Added to Fees Due by September 6, 2006 10. OFFICERS AND DIRECTORS Р TITLE LONDONO, NESTOR O NAME STREET ADDRESS 12815 SW 116 STREET CITY-ST-7IP MIAMI, FL 33166 DILE LONDONO, EDILMA 12815 SW 116 STREET STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33166 IIILE NAME STREET ADDRESS DO NOT WRITE CITY ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY ST-ZIP TITLE

12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. 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 eath, 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

STREET ADDRESS CITY-\$1-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED