

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000030206

Entity Name: H.B. WALLCOVERINGS, INC.

FILED  
Jan 09, 2004  
Secretary of State

## Current Principal Place of Business:

8001 CRESPI BLVD #4D  
MIAMI BEACH, FL 33141

## New Principal Place of Business:

12355 NE 13TH AVENUE, SUITE # 105  
NORTH MIAMI, FL 33161

## Current Mailing Address:

8001 CRESPI BLVD #4D  
MIAMI BEACH, FL 33141

## New Mailing Address:

12355 NE 13TH AVENUE, SUITE # 105  
NORTH MIAMI, FL 33161

FEI Number: 90-0038746

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

SCAGLIONE, MICHAEL  
123 MADEIRA AVE., SUITE 100  
MIAMI, FL 33134 US

## Name and Address of New Registered Agent:

SCAGLIONE, MICHAEL  
475 BILTMORE WAY, SUITE # 300  
CORAL GABLES, FL 33134 US

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.

SIGNATURE:

01/09/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: BERGEN, HARALD  
Address: 8001 CRESPI BLVD #4D  
City-St-Zip: MIAMI BEACH, FL 33141

Title: S (X) Delete  
Name: HANGSTON, SHERRY  
Address: 3220 NW 18TH PLACE  
City-St-Zip: FORT LAUDERDALE, FL 33311

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: BERGEN, HARALD  
Address: 8001 CRESPI BLVD #4D  
City-St-Zip: MIAMI BEACH, FL 33141

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HARALD BERGEN

P

01/09/2004

Electronic Signature of Signing Officer or Director

Date