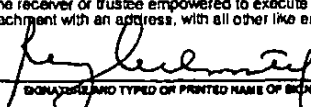


2005 FOR PROFIT CORPORATION ANNUAL REPORT

06-20-2005 90004 028 ***150.00
P02000108142

DOCUMENT # P02000108142					
1. Entity Name ORIENTAL HOME DEOCR AND FURNITURES, INC.					
Principal Place of Business 2183 US 27 N SEBRING, FL 33870			Mailing Address 2183 US 27 N SEBRING, FL 33870		
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 81-0588078	
				Applied For Not Applicable	
				5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent VELMONTE, BENJAMIN 3815 RAMIRO ST SEBRING, FL 33872				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 registering) DATE _____					
FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	D ☒ Delete	TITLE	Director - VP (Marketing) ☐ Change ☒ Addition		
NAME	SANTOS-VELMONTE, TERI	NAME	Jonathan Reyes		
STREET ADDRESS	3815 RAMIRO ST	STREET ADDRESS	604 Lemon St		
CITY - ST - ZIP	SEBRING, FL 33872	CITY - ST - ZIP	Sebring, FL 33870		
TITLE	D ☒ Delete	TITLE	Director, VP (ADM.) ☐ Change ☒ Addition		
NAME	VELMONTE, BENJAMIN	NAME	ELSA SAMSON		
STREET ADDRESS	3815 RAMIRO ST	STREET ADDRESS	3801 Stonefield Dr.		
CITY - ST - ZIP	SEBRING, FL 33872	CITY - ST - ZIP	ORLANDO, FL 32806		
TITLE	☐ Delete	TITLE	Director, TREASURER ☐ Change ☒ Addition		
NAME		NAME	ELISA VILLEGAS		
STREET ADDRESS		STREET ADDRESS	810 PICK FIVE TERRACE		
CITY - ST - ZIP		CITY - ST - ZIP	LAKE MARY, FL 32746		
TITLE	☐ Delete	TITLE	Director - President ☐ Change ☒ Addition		
NAME		NAME	SANTOS-VELMONTE TERI		
STREET ADDRESS		STREET ADDRESS	3815 RAMIRO ST, Sebring, FL 33872		
CITY - ST - ZIP		CITY - ST - ZIP			
TITLE	☐ Delete	TITLE	Director - VP (FINANCE) ☐ Change ☒ Addition		
NAME		NAME	VELMONTE, BENJAMIN		
STREET ADDRESS		STREET ADDRESS	3815 RAMIRO ST, Sebring, FL 33872		
CITY - ST - ZIP		CITY - ST - ZIP			
TITLE	☐ Delete	TITLE			
NAME		NAME			
STREET ADDRESS		STREET ADDRESS			
CITY - ST - ZIP		CITY - ST - ZIP			
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: 		6/10/05		(863) 384-9330	
TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Benjamin Velmonte, Director		Date		Daytime Phone #	