

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000103148

Entity Name: UNITY FURNITURE, INC.

FILED  
Jan 09, 2004  
Secretary of State

## Current Principal Place of Business:

20444 N.E. 15TH COURT  
N MIAMI BEACH, FL 33179

## New Principal Place of Business:

## Current Mailing Address:

20444 N.E. 15TH COURT  
N MIAMI BEACH, FL 33179

## New Mailing Address:

FEI Number: 20-0222474

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BUTLER, VINCENT  
20444 N.E. 15TH COURT  
N MIAMI BEACH, FL 33179

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP ( ) Change (X) Addition  
Name: CROWELL, JUNE  
Address: 18351 NW 8TH STREET  
City-St-Zip: PEMBROKE PINES, FL 33029

Title: P ( ) Change (X) Addition  
Name: BUTLER, VINCENT  
Address: 20444 NE 15TH COURT  
City-St-Zip: N. MIAMI BEACH, FL 33179

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: JUNE CROWELL

VP

01/09/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date