

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000010132

Entity Name: INFINITY CUSTOM FURNITURE, INC.

FILED  
Apr 29, 2008  
Secretary of State

## Current Principal Place of Business:

1135 STARKEY RD UNIT 6  
LARGO, FL 33771

## New Principal Place of Business:

## Current Mailing Address:

2528 ANDERSON DR W  
CLEARWATER, FL 33761

## New Mailing Address:

FEI Number: 20-4142315

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

RUBSAMEN, JUDY  
2528 ANDERSON DR W  
CLEARWATER, FL 33761 US

## 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: P ( ) Delete  
Name: PAPJES, PETER  
Address: 2528 ANDERSON DRIVE W  
City-St-Zip: CLEARWATER, FL 33761

Title: VP ( ) Delete  
Name: CHRISTENSON, STEPHEN A  
Address: 640 59TH STREET S  
City-St-Zip: ST. PETERSBURG, FL 33707

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: PETER PAPJES

MR.

04/29/2008

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

\_\_\_\_\_  
Date