2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000040513

Entity Name: NEW BEGINNINGS FURNITURE CONSIGNMENT, INC.

FILED Apr 13, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

17274 SAN CARLOS BLVD 17274 SAN CARLOS BLVD FT MYERS BCH, FL 33931

SUITE #210

FT MYERS BCH, FL 33931

Current Mailing Address: New Mailing Address:

17274 SAN CARLOS BLVD 17274 SAN CARLOS BLVD FT MYERS BCH, FL 33931 **SUITE #210**

FT MYERS BCH, FL 33931

FEI Number: 04-3850442 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CORPDIRECT AGENTS, INC. CASSANO, PAMELA K PD 17377 ORIÓLE RD. 515 E PARK AVE

TALLAHASSEE, FL 32301 FORT MYERS, FL 33967 US 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: PAMELA K. CASSANO 04/13/2007

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

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() Delete

OFFICERS AND DIRECTORS:

VD

STD

CASSANO, PAMELA

FT MYERS, FL 33912

CASSANO, JAMES JR.

FT MYERS, FL 33913

764 ARUNDEL CIR

CASSANO, JAMES

17377 ORIOLE RD

FT MYERS, FL 33912

17377 ORIOLE RD

Title:

Title:

Title:

Name:

Address:

City-St-Zip:

Name:

Address:

City-St-Zip:

Name:

Address:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Change () Addition

CASSANO, PAMELA K Name: 17377 ORIOLE RD Address: FT MYERS, FL 33967 US City-St-Zip:

Title: VD (X) Change () Addition

Name: CASSANO, JAMES W JR. 764 ARUNDEL CIR Address: FT MYERS, FL 33913 US City-St-Zip:

Title: (X) Change () Addition STD

CASSANO, JAMES W Name: 17377 ORIOLE RD Address: City-St-Zip: FT MYERS, FL 33967 US

I hereby certify that the information supplied with this filing does not qualify for the 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: JAMES W. CASSANO STD 04/13/2007