

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P08000007951

FILED
Aug 26, 2009
Secretary of State**Entity Name:** BEST VARIETY FURNITURE, INC.**Current Principal Place of Business:**2101 WEST ATLANTIC BLVD
124
POMPANO BEACH, FL 32909**New Principal Place of Business:**3649 NW 19TH STREET
LAUDERDALE LAKES, FL 33311**Current Mailing Address:**2101 WEST ATLANTIC BLVD
124
POMPANO BEACH, FL 32909**New Mailing Address:**3649 NW 19TH STREET
LAUDERDALE LAKES, FL 33311**FEI Number:** 26-2070527**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**TAPIA, L
2101 WEST ATLANTIC BLVD
124
POMPANO BEACH, FL 32909 US**Name and Address of New Registered Agent:**TAPIA, L
3649 NW 19 ST
LAUDERDALE LAKES, FL 33311 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: L TAPIA

08/26/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ALBINO, M
Address: 2101 WEST ATLANTIC BLVD SUITE# 124
City-St-Zip: POMPANO BEACH, FL 32909

Title: D () Delete
Name: TAPIA, L
Address: 2101 WEST ATLANTIC BLVD SUITE #124
City-St-Zip: POMPANO BEACH, FL 32909

Title: P () Delete
Name: RAMSAHAI, C
Address: 2101 WEST ATLANTIC BLVD SUITE #124
City-St-Zip: POMPANO, FL 32909

Title: S (X) Delete
Name: RAMSAHAI, C
Address: 2101 WEST ATLANTIC BLVD SUITE #124
City-St-Zip: POMPANO BEACH, FL 32909

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: TAPIA, L
Address: 3649 NW 19TH STREET
City-St-Zip: LAUDERDALE LAKES, FL 33311

Title: D (X) Change () Addition
Name: LEEDS, S
Address: 3649 NW 19TH STREET
City-St-Zip: LAUDERDALE LAKES, FL 33311

Title: S (X) Change () Addition
Name: ALBINO, M
Address: 3649 NW 19 ST
City-St-Zip: LAUDERDALE LAKES, FL 33311

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: L TAPIA

VP

08/26/2009

Electronic Signature of Signing Officer or Director

Date