2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 25, 2004 8:00 am
Secretary of State
03-25-2004 90030 011 ***150.00

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1. Entity Name
COMPLETE FURNITURE & INTERIORS INC

Principal Place of Business	Mailing Address
119 PARK LANE TITUSVILLE, FL 32780	P.O. BOX 1167 TITUSVILLE, FL 32781-1167 US

01262004 Chg-P CR2E034 (10/03)

2. Principal Place of Business	3. Mailing Address
1310 War Eagle Blvd Suite, Apt. #, etc.	P.O. Box 1167 Suite, Apt. #, etc.
City & State: Titusville, FL	City & State: Titusville, FL
Zip: 32796 Country: USA	Zip: 32781-1167 Country: USA

4. FEI Number 59-3209410 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
VENUTI, LOUIS 400 ORANGE STREET TITUSVILLE, FL 32796	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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P TREIDER, MITCHELL A ~~119 PARK LANE~~ 1310 War Eagle Blvd TITUSVILLE, FL 32796	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V Jose Gonzalez 6209 Royal Fern Street Orlando, FL 32810	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V KEARNS, CHRIS 337 ACOCH DRIVE TITUSVILLE, FL 32780	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V Joseph McGrouty 291 Short St Lake Mary, FL 32746	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V TREIDER, DOROTHY 3005 ROSE MARIE AVENUE TITUSVILLE, FL 32780	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V BENSENGER, CHARLES 3000 SHADOWS BAY BLVD UNIT 106 LONGWOOD, FL 32779	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

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: _____ 3.15.04 (321)403-0576
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #