

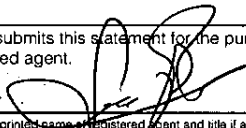
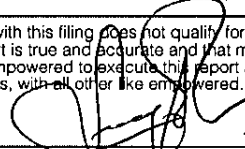


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2004 8:00 am
Secretary of State

04-26-2004 90425 006 ***150.00

DOCUMENT # P94000039041 1. Entity Name FURNISH CORP.					
Principal Place of Business 150 SUNNISLAND BLVD NORTH MIAMI BEACH, FL 33160				Mailing Address 150 SUNNISLAND BLVD NORTH MIAMI BEACH, FL 33160	
2. Principal Place of Business 709 LAKE BLVD		3. Mailing Address 709 LAKE BLVD			
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 			
City & State WESTON, FL		City & State WESTON, FL			
Zip 33326		Country BROWARD		4. FEI Number 65-0523977	
Zip 33326		Country BROWARD		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent PATRUNO, SERGIO 709 LAKE BLVD FT LAUDERDALE, FL 33326				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>	
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: 4-22-04 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE: D <input type="checkbox"/> Delete NAME: PATRUNO, SERGIO STREET ADDRESS: 709 LAKE BLVD CITY-ST-ZIP: FT LAUDERDALE, FL 33326				TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME: 709 LAKE BLVD STREET ADDRESS: WESTON, FL 33326 CITY-ST-ZIP:	
TITLE: <input type="checkbox"/> Delete NAME: STREET ADDRESS: CITY-ST-ZIP:				TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME: STREET ADDRESS: CITY-ST-ZIP:	
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TITLE: <input type="checkbox"/> Delete NAME: STREET ADDRESS: CITY-ST-ZIP:				TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME: STREET ADDRESS: CITY-ST-ZIP:	
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:  SERGIO PATRUNO 4-22-04 754-366-6161 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					