

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000043365 (3)

1. Corporation Name

CESAR REMODELING FURNITURE CORP.



Principal Place of Business

Mailing Address

**8457 N.W. 61ST STREET
MIAMI FL 33166**

**8457 N.W. 61ST STREET
MIAMI FL 33166**

2. Principal Place of Business

2a. Mailing Address

21 State, Apt. #, etc.

26 State, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

25

29

30

9. Name and Address of Current Registered Agent

**MARINO, CESAR L
8457 N.W. 61ST STREET
MIAMI FL 33166**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

3. Date Incorporated or Qualified

06/09/1994

3a. Date of Last Report

05/01/1995

4. FEI Number

65-0496672

Applied For
Not Applicable

5. Certificate of Status Desired

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes Yes No

10. Name and Address of New Registered Agent

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature (typed or printed name of registered agent if not applicable)

Typed Registered Agent's signature (typed or printed name)

DATE

OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

12. TITLE DELETE

13. 1.1 TITLE Change Addition

NAME **D MARINO, CESAR L**
STREET ADDRESS **5966 W. 18TH CT.**
CITY-ST-ZIP **HIALEAH FL 33012**

12 NAME

TITLE DELETE

13 1.2 STREET ADDRESS

NAME
STREET ADDRESS
CITY-ST-ZIP

14 CITY-ST-ZIP

TITLE DELETE

2.1 TITLE Change Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

2.2 NAME

TITLE DELETE

2.3 STREET ADDRESS

NAME
STREET ADDRESS
CITY-ST-ZIP

2.4 CITY-ST-ZIP

TITLE DELETE

3.1 TITLE Change Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

3.2 NAME

TITLE DELETE

3.3 STREET ADDRESS

NAME
STREET ADDRESS
CITY-ST-ZIP

3.4 CITY-ST-ZIP

TITLE DELETE

4.1 TITLE Change Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

4.2 NAME

SIGNATURE: *[Signature]*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE Change Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE Change Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

4-6-96

CR2E034 (12/95)