


2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

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|--|---|---|---|--|--|
| DOCUMENT # P94000046163 1. Entity Name PREMIER UPHOLSTERY, INC. | | | |  | |
| Principal Place of Business 2307 63 AVENUE E. SUITE BRADENTON, FL 34203 | | | Mailing Address 2307 63RD AVE. E. SUITE G BRADENTON, FL 34203 | | |
| 2. Principal Place of Business Suite, Apt. #, etc. | | 3. Mailing Address Suite, Apt. #, etc. | | | |
| City & State | | City & State | | | |
| Zip | Country | Zip | Country | 4. FEI Number 65-0505590 | |
| 5. Certificate of Status Desired <input type="checkbox"/> | | | | \$8.75 Additional Fee Required | |
| 6. Name and Address of Current Registered Agent HECKMAN, DONALD H 2335 S 63RD AVE E BRADENTON, FL 34203 | | | 7. Name and Address of New Registered Agent Name MONTGOMERY D. WOODS Street Address (P.O. Box Number is Not Acceptable) 2307 63rd Avenue East Suite G City Bradenton | | |
| 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: <i>Montgomery D. Woods</i> MONTGOMERY D. WOODS 4-17-06 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small> | | |
| Amended AR is \$61.25 | | 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 NAME STREET ADDRESS CITY-ST-ZIP | D SAMPSON, KENNETH M 2307 63RD AVE. N. SUITE G BRADENTON, FL 34203 | | TITLE NAME STREET ADDRESS CITY-ST-ZIP | P/D MONTGOMERY D. WOODS 2307 63rd Avenue East, Suite G Bradenton, Florida 34203 | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
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| 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <i>Montgomery D. Woods</i> | | | MONTGOMERY D. WOODS, President 941-756-1591 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small> | | |

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



04142006 Chg-P CR2E034 (11/05)

4. FEI Number 65-0505590 Applied For Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

7. Name and Address of New Registered Agent
 Name MONTGOMERY D. WOODS
 Street Address (P.O. Box Number is Not Acceptable) 2307 63rd Avenue East
 Suite G
 City Bradenton FL 34203

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: *Montgomery D. Woods* MONTGOMERY D. WOODS 4-17-06
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

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

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 P/D MONTGOMERY D. WOODS 2307 63rd Avenue East, Suite G Bradenton, Florida 34203

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SIGNATURE: *Montgomery D. Woods* MONTGOMERY D. WOODS, President 941-756-1591
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #