SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998, AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

19**9**8



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9400066465 (3) DESIGNER OFFICE FURNITURE OF MIAMI, INC.

Principal Place of Business 155 N.E 38TH STREET MIAMI FL 33137

2. Principal Place of Business

SIGNATURE:

Mailing Address

2a. Mailing Address

155 N.E 38TH STREET MIAMI FL 33137

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/09/1994

4. FEI Number

FILED
Jul 09 1998 8:00am
Secretary of State

Applied For

21				26						65-0522005	_ /_		Not Applicable	
Suite, Apt. #, etc.				Suite, Apt. #, etc.					5. Certificate of Status Desired		\$8	:75 Additional		
22				27	27					3. Cartificate of Status Desired		F	ee Required	
	City & State				City & State					6. Election Campaign Financing	_	\$	5.00 May Be	
23				28	28					Trust Fund Contribution	<u> </u>)A	dded to	
	Zip	Country			ZipCou			ıntry		8. This corporation owes or has paid the current year later gibble			arinta gible	
24			25	29		:	30			Personal Property Tax due June 3	о. 🗓	Yes	No No	
9. Name and Address of Current Registered Agent								10. Name and Address of New Registered Agent						
BOOTH, PHILLIP B								81	Name					
155 N.E 38TH STREET								82	Street Adde	t Address (P.O. Box Number is Not Acceptable)				
MIAMI FL 33137								"	2 Street Address (F.O. Box Hullings is Not Acceptable)					
								83						
								-						
								84	City		FL	85	Zip Code	
11. Pursuant to the provisions of sections 607.0502 and 607.1508, 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, typod or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstaling) DATE														
12.		Signature, typed	OFFICERS A			(NOI	13.	ered Ag	ent Bignature requ	ADDITIONS/CHANGES TO OFFICE	DATE	D DID	ECTORS IN 42	
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1 4 .	indicated of an officer of in Block 12	oriny that the on this annua or director of 2 or Block 13	information supplied will il report or supplement the corporation of the r if changed or on an at	n this filin Dannual r celver o lacht	g does not que eport is true a r trustee empo with ap adm	ality for the and accura owered to itse.	e exemple te and execute	ouon that r this	stated in secti my signature s report as req	ion 119.07(3)(i), Florida Statutes. I further shall have the same legal effect as if mac uired by Chapter 607, Florida Statutes; a	certify to de under nd that	nat the oath; my na	that I am me appears	