FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



ELORIDA DEPARTMENT DE STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name P94000069469 (2)

ORIENTAL FURNITURE IMPORT, INC.

FILED Jan 28 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 2301 S. FEDERAL HWY 2301 S. FEDERAL HWY. FORT LAUDERDALE FL 33316 FORT LAUDERDALE FL 33316 DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified 09/21/1994 4. FEI Number Applied For 2. Principal Place of Business 65-0521074 Not Applicable 26 Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 26 Country Zip Zip 8. This corporation owes or has paid the current year Intangible Y Yes Personal Property Tax due June 30. 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name **BOURGOIGNIC, P TRISTAN** 2801 PONCE DE LEON BLVD Street Address (P.O. Box Number is Not Acceptable) 82 **SUITE 707** 83 CORAL GABLES, FL 33134 84 Zip Code City 11. Pursuant to the provisors 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** (NOTE: Registered Agent signature required when reinstating) ed name of rogistered agent and title it applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. Change Addition PDMT DELETE 1.1 TITLE TITLE CORSO, CHRISTIAN 1.2 NAME NAME 4751 NW 21ST ST. BLDG 12, APT 517 1.3 STREET ADDRESS STREET ADDRESS LAUDERHILL FL 1.4 CITY - ST - ZIP CITY-ST-ZIP Change Addition DELETE 2.1 TITLE TITLE CORSO, MARIE THERESE 2 2 NAME NAME 4751 NW 21ST, BLDG 12, APT 517 2.3 STREET ADDRESS STREET ADDRESS LAUDERHILL FL 2 4 CITY-ST-7IP CITY-ST-ZIP DELETE Change Addition 3.1 TITLE JITE BOURGOIGNIE, P. TRISTAN E 3.2 NAME 2801 PONCE DE LEON BLVD., SUITE 707 3 3 STREET ADDRESS STREET ADDRESS **CORAL GABLES FL** 3.4 CITY-ST-7/P CITY-ST-ZIP Change Addition DELETE 4.1 TOTLE TITLE 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4 4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 5.1 TITLE TITLE 5 2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 54 CITY-ST-ZIP CITY-ST-ZIP DELETE 61 TILLE ☐ Change Addition TITLE 62 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS

14. 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 annual report or suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath, that I am an officer or director of the corporation of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or pn an attachment with an address.