09/24/00 12:08 FAX 01

SECOND NOTICE. CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: $225 IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375.)

PROFIT CORPORATION ANNUAL REPORT 1996

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

225.00

[redacted]

DOCUMENT # P94000089539 (8)

1. Corporation Name

FURNITURE WORKS INC OF MARGATE

Principal Place of Business:
1157 BANKS ROAD
POMPANO BEACH FL 33063

Mailing Address:
1157 BANKS ROAD
POMPANO BEACH FL 33063

3. Date Incorporated or Qualified: 12/12/1994
3a. Date of Last Report: 05/01/1995
4. FEI Number: 65-0538693 — 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

2. Principal Place of Business: 21 — Suite, Apt. #, etc. 22 — City & State 23 — Zip 24 — Country 25
2a. Mailing Address: 26 — Suite, Apt. #, etc. 27 — City & State 28 — Zip 29 — Country 30

9. Name and Address of Current Registered Agent

JACKSON, ALEXANDER
1800 SO OCEAN DRIVE A1A
SUITE 1004
POMPANO BEACH FL 33062

10. Name and Address of New Registered Agent

81 Name: MARK SOHN
82 Street Address (P.O. Box Number is Not Acceptable): 1157 BANKS ROAD
83
84 City: MARGATE FL 85 Zip Code: 33063

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 ______ 7/31/96

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	
S	SOHN, MARK	1157 BANKS ROAD	MARGATE FL 33063	DELETE
P	CASSETT, MARK	1157 BANKS ROAD	MARGATE FL 33071	DELETE
				DELETE
				DELETE
				DELETE
				DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

	TITLE	NAME	STREET ADDRESS	CITY, ST, ZIP	
1					Change / Addition
2					Change / Addition
3					Change / Addition
4					Change / Addition
5					Change / Addition
6					Change / Addition

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***450.00

CR2E034 (3/96)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 supplemental annual 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE ______ 7/31/96