EALE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9500005964

COSTON CONTEMPORARY FURNITURE, INC.

FILED Apr 16 1997 8:00am Secretary of State

Principal Place		Mailing Address			
221B	N.E. 13TH STREET	- 221BN	E. BIH STREET		
Paren	UOBEACH, FL. 33060	POHLAM	OBEACH, FL. 33060		
יהוויטן	oupenca, ici	,	•	3. Date Incorporated or Qualified ### ################################	3a. Date of Last Report 05/01/1996
2. Priodou Place of Business 21]		2a. Mailing Address 26		4. FEI Number Applied For 65-0554762 Not Applicable	
Suric Act # refe. 22		Suite, Apt #, etc.		5. Certificate of Status Desired S8.75 Additional Fee Required	
City & State 23		City & State		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
7φ 24	Country 25	Zip 29	Country 30	8. This corporation has hability for in Florida Statutes	ntangible tax under s. 199.032, Yes No
	9. Name and Address of Current		84 Nome	10. Name and Address of New Re	Jistered Agent
1	SCOTT WARREN	1	81 Name		·
	221 B.N.E. 13 I.H.S.	rd CFT	82 Street Addres	ss (P.O. Box Number is Not Acceptab	le)
•	POMPANO BEACHI	FC, 33060	83		
	,		84 City		85 Zip Cade
	o the provisions of Sections 607 0502	a. d 207 4000 Flysida Clat.	to the object and all areas		FL
S'GNATURE 12. 1.01F	OFFICERS AND PRESIDENT SCOTT WARREA	DIRECTORS DELETE	TE Higgistered Agent signature required 13. 1.1 TITLE 1.2 NAME	when reinstating) ADDITIONS/CHANGES TO OFFIC	Change Addition
STREET ADEA ISS	SCOTT WARREA 4557 NW 9IH AV FORT CAUDERDALE	ENUE E. 3706V	1.3 STREET ADDRESS		
101E	PORT MOVERANCE	DELETE	1.4 CITY - ST - ZIP 2.1 TITLE		Change Addition
NAM			2.2 NAME		Ch quade Ch videttan
STREET ADDRESS			2.3 STREET ADDRESS		
City 2, 5th			2 4 CITY - ST-ZIP		
rif[]		[] DELETE	31 TITLE	•	L Change L Addition
Hatti-			3.2 NAME		
STREET CHREST			3.3 STREET ADORESS		
1914 SU ZII 1014		DELETE	3.4. CITY-ST-ZIP 4.1 TITLE		Change Addition
NAME:			4 2 NAME		
\$'96 (LA (68) \$5			4.3 STREET ADDRESS		!
159 11 72			4.4 CITY - ST - ZIP		
tru:		DELETE	5 1 TITLE	0,	Change Addition
TAM			5.2 NAME	, Y	JV, J(\)
S4863 L20086 05			5 3 STREET ADDRESS	`	() () () () () () () () () ()
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. i		DETELE	6.1 TITLE	50000214	Cbange
naMi			6.2 NAME	50000214 -04/17/970101	0030
She 1,8508655			63 STREFT ADDRESS	***165,00	ee two taintien
(f) * (\$1-7-6) [and the second s		6.4 CITY - ST - ZIP		
14. I do nereb a formálica Laris an of appears of	 contry that the information supplied conticated on this are unlineport or sulface of director of the corporation or half is 112 or Block 12 in changed, if 	with this thing does not qual upplemental annual poort is the receiver or trustee empor on an attachment with an ad	iny for the exemption stated to true and accurate and that no wered to execute this report of dress	in Section 119.07(3)(1), Florida Statutes ny signature shall have the same lega as required by Chapter 607, Florida S	 i further certify that the leffect as if made under oath; that latutes; and that my name