

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000005964

1. Corporation Name

CUSTOM CONTEMPORARY FURNITURE, INC.

Principal Place of Business
221B NE 13TH STREET
POMPANO BEACH FL 33060

Mailing Address
221B NE 13TH STREET
POMPANO BEACH FL 33060

FILED
Mar 24, 1999 8:00 am
Secretary of State

03-24-1999 90028 023 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/24/1995

4. FEI Number

65-0554762

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 owes the current year Intangible
Personal Property Tax.

Yes ☐ No ☒

9. Name and Address of Current Registered Agent

WARREN, SCOTT
221B NE 13TH STREET
POMPANO BEACH FL 33060

10. Name and Address of New Registered Agent

81 Name WARREN, SCOTT
82 Street Address (P.O. Box Number is Not Acceptable)
4175 NW 1st Court
83
84 City DELRAY BEACH FL 85 Zip Code 33445

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE 3/20/99

12. OFFICERS AND DIRECTORS

1.1 TITLE P
1.2 NAME WARREN, SCOTT
1.3 STREET ADDRESS 4557 NW 9TH AVENUE
1.4 CITY-ST-ZIP FT. LAUDERDALE FL 33064

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE WARREN, SCOTT, PRES. ☒ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS 4175 NW 1st Court
1.4 CITY-ST-ZIP DELRAY BEACH, FL 33445

2.1 TITLE WARREN, LORE M. ☐ Change ☒ Addition
2.2 NAME V.PRES.
2.3 STREET ADDRESS 4175 NW 1st Court
2.4 CITY-ST-ZIP DELRAY BEACH, FL 33445

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/20/99 (954) 788-9414

Date Daytime Phone #

CR2E034 (1/98)