2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 03, 2011
Secretary of State

DOCUMENT# P95000028566

Entity Name: FURNITURE REPAIR CLINIC, INC.

Current Principal Place of Business:

10801 NW 18TH ST
PEMROKE PINES, FL 33026

New Principal Place of Business:

Current Mailing Address:

10801 NW 18TH ST
PEMROKE PINES, FL 33026

New Mailing Address:

FEI Number: 65-0578161 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GOLTZMAN, STEPHEN
10801 NW 18TH ST
PEMROKE PINES, FL 33026 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D
Name: GOLTZMAN, ILLONA
Address: 10801 NW 18TH ST
City-St-Zip: PEMROKE PINES, FL 33026

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: ILLONA GOLTZMAN D 02/03/2011

Electronic Signature of Signing Officer or Director Date