

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 # P95000033597  
1. Corporation Name

Pace Furniture Inc

Principal Place of Business

Mailing Address

4592 Chumuckla Hwy  
Pace FL 32571

SAME

2. Principal Place of Business

2a. Mailing Address

21	26
Suite, Apt #, etc.	Suite, Apt #, etc.
22	27
City & State	City & State
23	28
Zip	Zip
24	29
Country	Country

9. Name and Address of Current Registered Agent

Robert Cates  
4592 Chumuckla Hwy  
Pace FL 32571

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	City
84	City
FL	85 Zip Code

11. Pursuant to the provisions of Sections 607.06, 607.07, 607.08, 607.09, 607.10, 607.11, 607.12, 607.13, 607.14, 607.15, 607.16, 607.17, 607.18, 607.19, 607.20, 607.21, 607.22, 607.23, 607.24, 607.25, 607.26, 607.27, 607.28, 607.29, 607.30, 607.31, 607.32, 607.33, 607.34, 607.35, 607.36, 607.37, 607.38, 607.39, 607.40, 607.41, 607.42, 607.43, 607.44, 607.45, 607.46, 607.47, 607.48, 607.49, 607.50, 607.51, 607.52, 607.53, 607.54, 607.55, 607.56, 607.57, 607.58, 607.59, 607.60, 607.61, 607.62, 607.63, 607.64, 607.65, 607.66, 607.67, 607.68, 607.69, 607.70, 607.71, 607.72, 607.73, 607.74, 607.75, 607.76, 607.77, 607.78, 607.79, 607.80, 607.81, 607.82, 607.83, 607.84, 607.85, 607.86, 607.87, 607.88, 607.89, 607.90, 607.91, 607.92, 607.93, 607.94, 607.95, 607.96, 607.97, 607.98, 607.99, 607.100, 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. I am familiar with and accept the appointment of the above-named agent.

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 of Section 607.0505, Florida Statutes.

SIGNATURE

Signature of officer or printed name of registered agent (if applicable)

(NOTE: Registered Agent signature required when re-appointing)

DATE

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	[ ] DELETE
	Pres ROBERT CATES	4592 Chumuckla Hwy Pace FL 32571		
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	[ ] DELETE
	VP Sec Treas	4592 Chumuckla Hwy Pace FL 32571		
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	[ ] DELETE
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	[ ] DELETE
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	[ ] DELETE
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	[ ] DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	[ ] Change [ ] Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-ST-ZIP	
21 TITLE	[ ] Change [ ] Addition
22 NAME	
23 STREET ADDRESS	
24 CITY-ST-ZIP	
31 TITLE	[ ] Change [ ] Addition
32 NAME	
33 STREET ADDRESS	
34 CITY-ST-ZIP	
41 TITLE	[ ] Change [ ] Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	
51 TITLE	[ ] Change [ ] Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	
61 TITLE	[ ] Change [ ] Addition
62 NAME	
63 STREET ADDRESS	
64 CITY-ST-ZIP	

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\*\*\*\*150.00 \*\*\*\*150.00

LS

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), 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, 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:

*Robert Cates*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

99 JUL 26 AM 9:58  
SECRETARY OF STATE  
KATHERINE HARRIS, FLORIDA

CR2E034 (11/98)

2  
P. 01

7/21/99

Leslie Sellers

Re: Letter Number: 399A00035783

Your office returned the enclosed annual report and check to us because we did not explain in writing why it was not properly filed by May 1st, as required.

After talking with you on the first of July, our total goal was to get this paid ASAP. We greatly appreciated you allowing us to pay this without the penalty.

I failed to consider the numerous phone calls you must receive each day. We did not receive any paperwork at all concerning this annual corporation fee. This business was purchased in June 1998 and without receiving any prior notification, we were simply not aware that we were responsible to pay this.

You clearly stated that this would be the only time that you would waive the penalty. We are very grateful and I assure you we have taken steps to be sure this will never be late again.

*I thank you!*

*Betty Cat*

*Sec-Treas*

*Letter prepaid by our accountant, filed to us. Thx for your consideration!*