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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000066691

Lastrada Furniture, Inc.

Principal Place of Business 1779 N.W. 38th Avenue

Mailing Address 1779 N.W. 38th Avenue

			t and all Pl	t and while Pl			DO NOT WRITE IN THIS SPACE					
Lauderhill, FL			Lauderhill, FL			3. Date Incorporated or Qualified						
33311			33311				08/29/1995					
2. Principal Place of Business			2a. Mailing Address						Applied For			
21			26			ļ	<u> </u>				lot Applicable	
Suite, Apt. #, etc.			Suite, Apt. #, etc.			5. Certifi	cate of Status De	sired		T	Additional Required	
City & State			City & State			C Clostic	on Compaign Fin					
23			28			6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees						
Zip		Country	Zip Country				orporation owes		aid the cu			
24	25		29	30			Personal Property Tax due June 30. 🔲 🗓 No					
	9. Name and	Address of Current I	Registered Agent				10. Name	and Address o	f New R	egistered	Agent	
Beki Franco						81 Name						
6611 Racquet Club Drive				82 Street Addr			ess (PO. Box	Number is Not	Accepts	ıble)		
Lauderhill, FL 33319							<u> </u>					
Lu	auciiiii,	2 000 10		83	3							,
				84	1	City				FL	85 Zip	Code
11. Pursuant office or r	to the provisions egistered agent,	of Sections 607.0502 a or both, in the State of	and 607.1508. Florida Statut Florida Such change was ons of, Section 607.0505, Fl	tes, the above	/e-	named corpo the corporatio	oration submon's board of	nits this statemen f directors. I here	t for the by acce	purpose o	of changing pointment as	its registered. registered
agent. La	ım famıllar wyn, a	ind accept the obligation	ons of, Section 607.0505, FF	orida Statute	95							
SIGNATURE _	Signature, typed or pri	ntel name di registereo agenti	and tite if applicable Beki	Franco	jen	nt signature required	d when reinstatin	g) .		DATE		
12.		OFFICERS AND I		13.	_			ONS/CHANGES	TO OFF	ICERS AN	ID DIRECTO	RS IN 12
TITLE	P/D		☐ DELETE	1 1 TITLE							☐ Change	Addition
NAME	Eli Mord	dehay		1.2 NAME								
STREET ADDRESS	1779 N.	W. 38th Avenue		13 STREE	T A	ADDRESS						
CITY-\$T-ZIP		nill, FL 333 <u>11</u>		1.4 CITY	_	- ZIP						
TITLE	D/VP_		☐ DELETE	2.1 TITLE							☐ Change	☐ Addition
NAME	Beki Fra			2 2 NAME								
STREET ADDRESS	1	cquet Club Drive		2 3 STREE		1						
CITY-ST-ZIP	Lauderi	nill, FL 33319	DELETE	2. 4 CITY	_	í-ZIP					Change	☐ Addition
TITLE			- Differe	3.1 TITLE 3.2 NAME							☐ Change	Addition
NAME STREFT ADDRESS				3 3 STREE		Innpecc						
				34 CITY-								
CITY-ST-ZIP TITLE			☐ DELETE	4 1 TITLE	_	-2.17					Change	Addition
NAME				4, 2 NAME								
STREET ADDRESS	- ;			43 STREE	ΤA	ADDRESS						
CITY - ST - ZIP				4 4 CITY-	ST-	- ZIP						
TITLE		· · · · · · · · · · · · · · · · · · ·	☐ DELETE	5 1 TITLE	_					-	☐ Change	☐ Addition
NAME				5.2 NAME								
STREET ADDRESS				5 3 STREE	ΤA	ODRESS						
CITY-ST-ZIP				5 4 CITY-	ST.	- ZIP						
TITLE			DELETE	6 1 TITLE							☐ Change	☐ Addition
NAME				62 NAME								
STREET ADDRESS				63 STREE	T A	ODRESS						

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.

SIGNATURE: S

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING Eli Mordehay

Dayame Phone #

FILED

May 17, 1999 8:00 am Secretary of State

05-17-1999 90012 043 ***150.00

CR2E034 (10/97)