

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION

1997 FOR AR



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

APPROVED
AND
FILED

1997 OCT 31 PM 2:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P95000081345

1. Corporation Name

FANTASY FLOORS & FURNISHINGS, INC.

Principal Place of Business

60 DOLPHIN DRIVE
TREASURE ISLAND FL 33706

Mailing Address

60 DOLPHIN DRIVE
TREASURE ISLAND FL 33706



If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified
To Do Business in Florida

01/01/1996

Suite, Apt. #, etc.

7116-CENTRAL AVE

Suite, Apt. #, etc.

7116-CENTRAL AVE

City & State

ST. PETE, FL.

City & State

ST. PETE, FL.

Zip

33707

County

PINELLAS

Zip

33707

County

PINELLAS

5. FEI Number

69-3349612

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
D	GEFFON, CLIFFORD	60 DOLPHIN DRIVE	TREASURE ISLAND FL 33706
			400002349504--3 -11/17/97--01144--012 ****165.00 ****165.00
			SCC 10-31-97

8. Name and Address of Current Registered Agent

GEFFON, CLIFFORD
60 DOLPHIN DRIVE
TREASURE ISLAND FL 33706

9. Name and Address of New Registered Agent

Name **CLIFFORD CLIFF GEFFON**
Street Address (P.O. Box Number is Not Acceptable)
7116-CENTRAL AVE
Suite, Apt. #, Etc.
ST. PETE
City
ST. PETE
State
FL
Zip Code
33707

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of
Registered Agent

[Signature] **SURE ATTACHED**

Date **10/29/97**

REGISTERED AGENT MUST SIGN

11. This corporation owes or has paid the current year
Intangible Personal Property tax due June 30.

Yes ☒ No ☐

(See other side for Information
on Intangible tax.)

12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
CLIFFORD CLIFF GEFFON

10/29/97 **813-341-1808**
Date Daytime Phone #

CR2040 (8/97)



TO THE BOARD REVIEW -

SHORTLY AFTER OPENING THIS BUSINESS IN JANUARY 1996, I RENTED SPACE AT 7116 - CENTRAL AVE (MAY 29, 1996). I WAS THEN ADVISED TO NOTIFY ALL PARTIES, AND MOST OF ALL, THE STATE & IRS & SUPPLIERS OF MY NEW PRINCIPAL ADDRESS, SO AS TO KEEP ALL BUSINESS RESPONSIBILITIES CURRENT.

UPON CALLING 850-487-6059 THIS A.M. 10/29 I WAS ADVISED TO SEND \$165.00 + COMPLETED PAPER WORK A.S.A.P. PLEASE CONSIDER THE FACT WITH THIS ADDRESS SITUATION NOT ALL CORRESPONDENCE CLEARLY GOES TO THE PROPER PLACE. I AM RESPONSIBLE + AM TRYING TO GET THIS BUSINESS TO CONTINUE TO GROW. AS A NEW FLORIDA SMALL BUSINESS PLEASE CONSIDER TO WORK WITH ME AS TO MY INTENTIONS ARE TO KEEP IN GOOD STANDINGS WITH THE STATE, NOT TO AVOID MY OBLIGATIONS.

SINCERELY Cliff Jeffords