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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997 DOCUMENT # P95000094712 (3)

ASPREE FURNISHINGS INC.

## FILED Jan 16 1997 8:00am Secretary of State



2. Principal National Report Plants of Business of Bus	Principal Place 800 NW 166ST MIAMI FL 33169 US		Mailing Address 14539 MEMORIAL HWY. MIAMI FL 33161-2034			i sanceal he index anni anni adril acin anio inti dinin (ende ciela cibi ani						
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Size April 2, etc.    Solid April 2, etc.	"										ied For Applicabl	
City & Slate  City & Slate  28  Country  29  Country  30  Country  31  Country  31  Country  32  Country  32  Country  32  Country  33  Country  34  Country  35  Country  36  This corporation has liability for minangible tax unders in 19  Florida Statutes  10. Name and Address of New Registered Agent  LAUFER STEVE A  14539 MEMORIAL HWY.  MIAMI FL 33161  82  Street Address (P.O. Box Number is Not Acceptable)  83  Street Address (P.O. Box Number is Not Acceptable)  84  City  Country  10. Name and Address of New Registered Agent  LAUFER STEVE A  14539 MEMORIAL HWY.  MIAMI FL 33161  85  Street Address (P.O. Box Number is Not Acceptable)  86  City  City  Country  Address of New Registered Agent  LAUFER STEVE A  14539 MEMORIAL HWY.  MIAMI FL 33161  87  Street Address (P.O. Box Number is Not Acceptable)  88  City  Cit		#, etc.	- I - 1				5. Certificate of Status Desired					
Second Comment   Seco	City & State City & State						6. Election Campaign Financing				\$5.00 May Be Added to Fees	
LAUFER, STEVE A  14539 MEMORIAL HMY.  MAMI FL  20 CFF SC PR STEVE A  14539 MEMORIAL HMY.  MAMI FL  20 CFF SC PR  10 Name and Address of New Registered Agent  51 Name  52 Sirred Address (P.O. Box Number is Not Acceptable)  53 City  54 City  55 City  56 City  57 Determine the purpose of Sections CO 0.00 and 607 1608, Florida Stabutes, the above remed corporation submits this statement for the purpose of changing its registered from one of the complete of the composition of discotors. Thereby accept the apportment as registered from one of the composition of the composition of discotors. Thereby accept the apportment as registered from the composition of the composition of discotors. Thereby accept the apportment as registered agent. The composition of the composition of discotors. Thereby accept the apportment as registered agent. Thereby accept the apportment as registered agent. The composition of discotors. Thereby accept the apportment as registered agent. Th	Zip	10 100	Zφ	}a	untry		8. This corporation has liability for	_ ~	tax und			
LAUFER, STEVE A 14539 MEMORIAL HMY. MIAMIF E 33161  84 City FL 85 Zip Code  84 City FL 85 Zip Code  84 City FL 85 Zip Code  85 Zip Code  86 Zip Code  87 Zip Code  88 Zip Code  89 Zip Code  80 Zip Code  89 Zip Code  80 Zip Code	100-	72 25 JADC		[30]	Ţ						4	
11. Fursuant to the provisions of Scalenis 627 00-62 and 607 1508. Honds Statutes, the above-named corporation submits this statement for the purpose of changing its region of local or registered agent or both, in the State of Londs. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and metallicity accept the opporation's board of directors. I hereby accept the appointment as registered agent and metallicity accept the appointment as registered agent and metallicity.  10. Fursion of the purpose of changing its registered agent and metallicity accept the appointment as registered agent and metallicity.  11. Fursion of the purpose of changing its registered agent and of directors. I hereby accept the appointment as registered agent agent and registered agent agent and accept the open appointment as registered agent agent agent and accept the open	LALI		iit riegisteleu Agellt		81	Name	10. Nome and Address of New Fie	gistoreu i	-your			
MIAMI FL 33161  84 City FL 85 Zip Code official of registered agent or both with challe of Horist. Such change was authorized by the corporation's board of disactors. I hereby accept the appointment as registered agent or both with challe of Horist. Such change was authorized by the corporation's board of disactors. I hereby accept the appointment as registered for the format occupit the origination of section 607,000s, Florida Sicilutes.  SIGNATURE  SIGNATURE  12. OFFICE HIS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. ADDITIONS/CHANGE	1453	ren, steve x Kompmorial hwy.						f - 1				
### CITY ### PLANS   BS   Zip Code   ### City ### PL   BD   ### City ### Spatial requires when resulting   ### DOHN D BERGGROUND   ### D					82	Street Add	dress (P.O. Box Number is Not Acceptat	oie)				
11. Fursuant to the processions of Scotions C97 DBCP and 607 1508, Revieta Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent or both, as the State of Horida. Statutes such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiate with an appointment as registered agent agents are accept the objects of Scotion 607 0506, Florida Statutes.  SIGNATURE    Signature   Signature production of this part as an appointment as registered agents gradues requires when recording.    12.					83							
11. Personant to the provisions of Sections (07) (0.502 pair (607 1:008, Horida Statutes, the above-named corporation submits this statement for the purpose of changing its regional of control or both, in the State of Horida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as regis agent. Lam familiar with rand accept the cologations of, Section 607 0505, Florida Statutes.  SIGNATURE  12. OFFICE IS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1.1 INTE  SIGNAT MARK  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1.2 PAME  15. ADDITIONS/CHANGES TO OFFICERS AND D					84	City	· · · · · · · · · · · · · · · · · · ·		85	Zip Co	de	
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14. I do nereby cert by 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 arrival report or supplemental arrival 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 cyringed, or on an attachment with an address.

SIGNATURE:

John D. Berggren

1/7/97

(305) 637-000

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