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FILED
Aug 06 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000063703
1. Corporation Name

ORLANDO FURNITURE, INC.

Principal Place of Business
1410 W. Vine Street
Kissimmee, FL 34741

Mailing Address
1410 W. Vine Street
Kissimmee, FL 34741

3. Date Incorporated or Qualified July 29, 1996
3a. Date of Last Report na

2. Principal Place of Business
21 Suite, Apt. #, etc
22 City & State
23 Zip
24 Country
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4. FEI Number 59-3401685
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees
7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

Marvin Arevalo
1412 W. Vine Street
Kissimmee, FL 34741

10. Name and Address of New Registered Agent

81 Name Florida Corporate Support, Inc.
82 Street Address (P.O. Box Number is Not Acceptable) 200 E. Robinson Street, Suite 500
83
84 City Orlando, FL 85 Zip Code 32801

11. Pursuant to the provisions of Sections 607.0502 and 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *Florida Corporate Support, Inc.* *Asst. Sec.* 7/7/97
Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when constituting)

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP
1. D Marvin Arevalo 1410 W. Vine Street Kissimmee, FL 34741
2. D Manuel Arevalo 1410 W. Vine Street Kissimmee, FL 34741
3. ☐ DELETE
4. ☐ DELETE
5. ☐ DELETE
6. ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D/P/S ☐ Change ☒ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
2.1 TITLE D/V ☐ Change ☒ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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 from an attachment with an address.

SIGNATURE: *Marvin Arevalo* President

0728-97

CR2E034 (9/96)