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May 26 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P96000076406 (3) 1. Corporation Name FUTONS & FURNITURE WAREHOUSE, INC.					
Principal Place of Business 7901 NE 28D AVE MIAMI FL 33138			Mailing Address 7901 NE 28D AVE MIAMI FL 33138		
2. Principal Place of Business 21 515 FERGUSON DR Suite, Apt. #, etc. 22 City & State 23 ORLANDO FL Zip 24 32805		2a. Mailing Address 26 515 FERGUSON DR Suite, Apt. #, etc. 27 City & State 28 ORLANDO FL Zip 29 32805		3. Date Incorporated or Qualified 09/13/1996 3a. Date of Last Report 09/13/1996 4. FEI Number 65-0694119 Applied For Not Applicable 5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No	
9. Name and Address of Current Registered Agent UDDEEN, AZEEZ 735 NE 86 ST MIAMI FL 33138			10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code		
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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE					
12. OFFICERS AND DIRECTORS TITLE NAME STREET ADDRESS CITY - ST - ZIP 1. D UDDEEN, AZEEZ 735 NE 86TH ST MIAMI FL 33138 2. D FAGU, AWARD NARINE 8401 NW 17 AVE MIAMI FL 33147 3. ☐ DELETE 4. ☐ DELETE 5. ☐ DELETE 6. ☐ DELETE			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP 6.1 TITLE 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, or on an attachment with an address.

SIGNATURE: *Azeez Uddeen*

AZEEZ UDDEEN

11.30.98