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

PROFIT CORPORATION ANNUAL REPORT

1997



appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000099507 (1)

C & S UPHOLSTERY, INC.

Principal Place of Business Mailing Address 7000 BRYAN DAIRY RD. A-14 7000 BRYAN DAIRY RD. A-14 LARGO FL 33777 LARGO FL 33777-1612 3a. Date of Last Report 3. Date Incorporated or Qualified NIa 12/09/1996 2a. Mailing Address 4. FEI Number 59 -341 · 2966 2. Principal Place of Business Applied For 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Added to Fees Trust Fund Contribution Country Zip Country Zip This corporation has liability for intangible tax under s. 199.032, Yes No 24 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name SINGLETON. CINDY J 7000 BRYAN DAIRY RD, A-14 82 Street Address (P.O. Box Number is Not Acceptable) LARGO FL 33777 83 84 City 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 little if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 13. (96/6) (96/6) DELETE PRESIDENT Change Addition TITLE 1.1 TITLE cindy di Sinsileton 1.2 NAME NAME 435 juth Ave. SE Suite GIY STREET ADDRESS 1.3 STREET ADDRESS Florida 33771.4420 1.4 CITY-ST-ZIP CITY - ST - ZIP MARY EHYN BULAS DELETE TITLE 2.1 TITLE Change Addition NAME 2.2 NAME 11500 -110TL. ST.N. 2.3 STREET ADDRESS STREET ADDRESS Florida 33778.3210 2.4 CITY-ST-ZIP CITY-ST-7IP DELETE Change Addition 3 1 TITLE TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE 4.2 NAME ... NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-S1-ZIP 4.4 CITY-ST-ZIP DELETE 51 TITLE Change Addition TITLE 5.2 NAME NAM: CS STREET ADDRESS 5.3 STREET ADDRESS 515/97 5.4 CITY - ST-7IP City-St-Zip DELETE 6.1 TITLE Change Addition | TITLE 500002170685 -05/08/97--01008--036 6.2 NAME NAME **6.3 STREET ADDRESS** STREET ADDRESS ***165,00 CITY-ST-ZIP 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

FILED
May 05 1997 8:00am
Secretary of State

813)547 4662