

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000009111

FILED
Jan 21, 2004
Secretary of State

Entity Name: FURNITURE "R" US, INC.

Current Principal Place of Business:

200 S. STATE ROAD 7
HOLLYWOOD, FL 33023

New Principal Place of Business:

Current Mailing Address:

200 S. STATE ROAD 7
HOLLYWOOD, FL 33023

New Mailing Address:

FEI Number: 65-0727657

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DALAL, SHLOMO
962 S.W. 93RD TERRACE
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DALAL, SHLOMO
Address: 962 SW 93RD TERRACE
City-St-Zip: PLANTATION, FL 33324

Title: V.P. () Delete
Name: ELAZAR, PNINA
Address: 10141 S.W. 3RD STREET
City-St-Zip: PLANTATION, FL 33324 US

Title: TREA () Delete
Name: ELAZAR, MEIR
Address: 10141 S.W. 3RD STREET
City-St-Zip: PLANTATION, FL 33324 US

Title: SEC. () Delete
Name: WALLDMAN-DALAL, FANNY
Address: 962 S.W. 93RD TERRACE
City-St-Zip: PLANTATION, FL 33324 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SHLOMO DALAL

PRES

01/21/2004

Electronic Signature of Signing Officer or Director

Date