2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 08, 2004 08:00 AM
Secretary of State

DOCUMENT # P97000020087

1. Entity Name
CUBICLE CURTAIN FACTORY, INC.

Principal Place of Business	Mailing Address
2956 JOG ROAD GREENACRES, FL 33467 US	2956 JOG ROAD GREENACRES, FL 33467 US

01052004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0743177
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

SERIO, ARTHUR F III
602 WESTWOOD ROAD
WEST PALM BEACH, FL 33401

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	SERIO III, ARTHUR F
STREET ADDRESS	602 WESTWOOD ROAD
CITY-ST-ZIP	WEST PALM BEACH, FL 33401
TITLE	EVPD
NAME	SERIO, STEPHANIE S
STREET ADDRESS	8506 BEACONHILL ROAD
CITY-ST-ZIP	PALM BEACH GARDENS, FL 33410
TITLE	VPD
NAME	SERIO, ELIZABETH A
STREET ADDRESS	8506 BEACONHILL ROAD
CITY-ST-ZIP	PALM BEACH GARDENS, FL 33410
TITLE	VPD
NAME	SERIO, KAREN I
STREET ADDRESS	602 WESTWOOD ROAD
CITY-ST-ZIP	WEST PALM BEACH, FL 33401
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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01/09/04-80004-024 150.00

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12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: ARTHUR F. SERIO, III 01/05/2004 (561)514-8585
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Day/time Phone #