03-03-1999 90008 027 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000024489

1. Corporation Name

KIDS AND MORE FURNITURE STORE INC

KIUS AN	D MORE FURNITURE STO	JKE, INU.									
Principal Place	e of Business	Mailing Address				1)) 	11 3 11 01011 01001 1	MICO 1841 1941	
103 U.S. HIGHN											
SUITE C-1.C-2 SUITE C-1.C-2							DO NOT WRITE IN THIS SPACE				
JUPITER FL 33477 JUPITER FL 33477							3. Date Incorporated or Qualifed				
						1	03/13/1997				
2 Dringing! D	lace of Business	2a. Mailing Address					FEI Number		Apr	olied For	
	26						APPLIED FOR			t Applicable	
Suite, Apt.									\$8.75 A		
22 27							Certificate of Status Desired		Fee Red	quired	
City & State City & State							Election Campaign Financing		\$5.00	Мау Ве	
23	28						Trust Fund Contribution	Li	Added to	o Fees	
Zip	Country	Zip	Cour	itry		8.	This corporation owes the cur	rent year Int			
24	25	1=-1	30				Personal Property Tax.			□No	
	9. Name and Address of Curre	ent Registered Agent				10.	Name and Address of New	Register <u>ed</u>	Agent		
DAIO	D THOMAS I			81 Nam	е						
Baird, Thomas J 11891 U.S. Highway One Suite 201				82 Stree	et Addre	ress (P.O. Box Number is Not Acceptable)					
	ALM BEACH FL 33408			83							
11 17	ALIM DEACHTIE 30400		İ	84 City				FL	85 Zip C	ode	
	to the provisions of Sections 607.05	700 L007 4500 E1 : I- 01-4-4-			d sorse	ration	aubmite this statement for the			registered	
office or r	to the provisions of Sections 607.03 registered agent, or both, in the State im familiar with, and accept the oblig	e of Florida. Such change was at	ithorized	by the col	poration	n's bo	ard of directors. I hereby acce	pt the appoi	ntment as reg	jistered	
SIGNATURE	Signature, typed or printed name of registered as	rent and title if applicable (NOTE:	Registered :	Agent signatu	e required	when re	einstating)	DATE		\	
12.		IND DIRECTORS	13.	- gont signatur		A	ADDITIONS/CHANGES TO OF	FICERS AN	ND DIRECTOR	RS IN 12	
TITLE	P	☐ DELETE	1.1 TIT	LE					Change	Addition	
NAME	TOMASKO, KEVIN		1.2 NAME						•	<i>'</i>	
STREET ADDRESS	103 U.S. HIGHWAY ONE		1.3 STREET ADDRESS		s						
CITY-ST-ZIP	i	Jupiter FL 33477		1.4 CITY-ST-ZIP							
TITLE			2.1 TIT	2.1 TITLE					☐ Change	☐ Addition	
NAME			2.2 NA	2.2 NAME							
STREET ADDRESS			2.3 STI	REET ADDRES	is						
CITY-ST-ZIP			2. 4 CT	TY-ST-ZIP							
TITLE		☐ DELETE	3.1 TIT	LE					Change	☐ Addition	
NAME			3.2 NA	ME							
STREET ADDRESS			3.3 STI	REET ADDRES	is						
CITY-ST-ZIP			3.4. CI	Y-ST-ZIP	\bot						
TITLE		☐ DELETE	4.1 111	LE					☐ Change	Addition \	
NAME			4. 2 NA	ME			•				
STREET ADDRESS			4.3 ST	REET ADDRES	ss						
CITY-ST-ZIP				Y-ST-ZIP					Change	Addition	
TITLE		☐ DELETE	5.1 TIT						Change	☐ waaraan	
NAME			5.2 NA							Í	
STREET ADDRESS				REET ADDRES	20						
CITY-ST-ZIP		☐ DELETE	6.1 TIT	Y-ST-ZIP					☐ Change	Addition	
TITLE			6.2 NA						- +	LJ - 13011271	
NAME				REET ADDRES	ss						
STREET ADDRESS	I .		9.00	*** I LEADIVE						,	

CITY-ST-ZIP 14. 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 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 repeiver 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 an ap attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS