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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000039723

FILED Mar 11, 1999 8:00 am Secretary of State

03-11-1999 90184 041 ***150.00

1, Corporation						
KEITH C	SMITH'S FURNITURE INC.	•				
				1 10201000 110 13111 14011 00111 12111	1811) 1812 1918 1811 1831 1831 1	1 112 1111 1111
Principal Place	of Business	Mailing Address				
1684 RIDGEWOOD AVE 1684 RIDGEWOOD AVE						
HOLLY HILL FL 32117 HOLLY HILL FL 32117				DO NOT WRITE	IN THIS SPACE	
				3. Date Incorporated or Qualifed	IN THIS STACE	
						Ì
		A Selien Address		05/01/1997 4. FEI Number	Apr	olied For
1410 0:100		2a. Mailing Address	HOOD AVA	l "	—— —	Applicable
21 1419		20	WOOD NIC	59-3444540	\$8.75 A	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	Fee Rec	
22		27				
City & State	e	City & State		6. Election Campaign Financing	□ \$5.00 t	
	<u>y_HillFl</u>	28 Holly Hill	Country	Trust Fund Contribution		01668
Zip	Country	Zip 32127	¬	8. This corporation owes the currer	it year intangible ☐ Yes	No
321		120	30 usa	Personal Property Tax. 10. Name and Address of New Re		77''''
	9. Name and Address of Currer	nt Registered Agent	81 Name	10. Name and Address of New No	gistered Agent .	···
CHIT	יט עבודט ר					
SMITH, KEITH C			82 Street Add	ress (P.O. Box Number is Not Acceptab	le)	
	RIDGEWOOD AVE			Ridgewood Ave		
HOL	LY HILL FL 32117		83			1
			84 City		85 Zip C	Code
				y Hill	FL 321	
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statute	a the above semed corr	poration submits this statement for the pr	urpose of changing its	registered
office or r	anieterad agent or both in the State	of Florida, Such change was all	s, the above-named corp	poration submits this statement for the prior board of directors. I hereby accept	urpose of changing its the appointment as rec	registered gistered
office or r agent. I a	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida, Such change was all	s, the above-named corp	poration submits this statement for the pion's board of directors. I hereby accept	urpose of changing its the appointment as rec	registered gistered
office or r	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was au ations of, Section 607.0505, Flori	s, the above-named corp	ion's poard of directors. Thereby accept	urpose of changing its the appointment as reg	registered gistered
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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 suppliemental 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, with all other like empowered.

SIGNATURE

ATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-1-19

Que-615-1070