DOCUMENT # P98000015426 1. Entity Name '- 14TH STREET FURNITURE, INC.					Secretary of State 09-08-2002 90087 017 ***150.00			
Principal Pla 1025 NE 147 OCALA FL 3		Mailing Address P.O. BOX 2031 OCALA FL 34478					0001	
2. Principal	Place of Business 14th ST.	2031						
Suite, Apt	/0/			DO NOT WRITE IN THIS SPACE				
	ALA FL	City & State	FL	4. FEI	Number 59-3565148		Applied For Not Applicable	
Zip BL	34422 Sountry US	34478	Country	5. Cer	tificate of Status Desired	\$8.75 A Fee Requi		
	6. Name and Address of Current F	Registered Agent	Name	7. Nar	ne and Address of New Reg	istered Agent		
RYDIN, INGE 275 SW 72ND PL OCALA FL 34470				ess (P.O. Box Number is Not Acceptable)				
8. The above the obligat	e named entity submits this statement for tions of registered agent	NEE PYDIO	City egistered office or reg			FL Zip Co a. I am familiar with O 7 ~ O 3 - DATE	n, and accept	
Tax filing	oration is eligible to satisfy its Intangible requirement and elects to do so.	FEE IS \$550.00 2002 Fee will be \$7 e to Department of	30,00	Election Campaign Financ Trust Fund Contribution.		00 May Be ed to Fees		
11.	OFFICERS AND D		12.	ADDIT	IONS/CHANGES TO OFFICE	RS AND DIRECTOR	RS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P INGE, RYDIN 275 SW 72ND PL OCALA FL 34475	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S RYDIN, JULIA K 275 SW 72ND PLACE OCALA FL 34475	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition	
TITLE IAME STREET ADDRESS STY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			Change	☐ Addition	
ITLE IAME ITREET ADDRESS ITY-ST-ZIP	-	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition	
ITLE Ame Treet address ITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition	
TREET ADDRESS ITY-ST-ZIP	vertify that the information cumplied with the	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition	

I hereby certify that the information supplied with this filling 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 11 or Block 12 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

09-3-2002

352-35/-4488

14th STREET FURNITURE, Inc.

Machneto # P980000/5426

Phone 352-351-4488 Fax 352-351-1234

P.O. BOX 2031 2906 N.E. 14th STREET OCALA FL.34478 Email FURN14ST@ATLANTIC.NET September 03, 2002

FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

Enclosed is our UNIFORM BUSINESS REPORT for 2002

W did not receive the original copy of this report earlier this year. I did call your office and explained this, and I was told to send in the report with the original filing fee of \$150.00 and explain why it was not filed earlier. I realize that it is my responsibility to file on time, but when we never received the form I did not remember that we are supposed to file this every year.

Please let us know if there is any way the penalty of \$400.00 can be waived due to the fact that we never received this form. If not, please let us know and we will send an additional check for the penalty.

thanks for your consideration

Inge Rydin

14th. Street Furniture, Inc.