

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 # P98000029676
Corporation Name

EUROPEAN ROYAL FURNITURE, Inc.

Principal Place of Business

Mailing Address

3643 WINDING LAKE CIRCLE
ORLANDO, FLORIDA 32825

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

APRIL 1, 1998

4. FEI Number

APPLIED FOR

☒ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year intangible
Personal Property Tax. ☐ Yes ☒ No

Principal Place of Business

2a. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip Country

Zip Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL 85 Zip Code

NELSON GARCIA-MELLA
3643 WINDING LAKE CIRCLE
ORLANDO, FLORIDA 32825

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

| TITLE | NAME | STREET ADDRESS | CITY-ST-ZIP | TITLE | NAME | STREET ADDRESS | CITY-ST-ZIP | TITLE | NAME | STREET ADDRESS | CITY-ST-ZIP | TITLE | NAME | STREET ADDRESS | CITY-ST-ZIP | TITLE | NAME | STREET ADDRESS | CITY-ST-ZIP |
|---------------------------------|------|----------------|-------------|---------------------------------|------|----------------|-------------|---------------------------------|------|----------------|-------------|---------------------------------|------|----------------|-------------|---------------------------------|------|----------------|-------------|
| <input type="checkbox"/> DELETE | | | | <input type="checkbox"/> DELETE | | | | <input type="checkbox"/> DELETE | | | | <input type="checkbox"/> DELETE | | | | <input type="checkbox"/> DELETE | | | |
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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

| 1.1 TITLE | 1.2 NAME | 1.3 STREET ADDRESS | 1.4 CITY-ST-ZIP | 2.1 TITLE | 2.2 NAME | 2.3 STREET ADDRESS | 2.4 CITY-ST-ZIP | 3.1 TITLE | 3.2 NAME | 3.3 STREET ADDRESS | 3.4 CITY-ST-ZIP | 4.1 TITLE | 4.2 NAME | 4.3 STREET ADDRESS | 4.4 CITY-ST-ZIP | 5.1 TITLE | 5.2 NAME | 5.3 STREET ADDRESS | 5.4 CITY-ST-ZIP | 6.1 TITLE | 6.2 NAME | 6.3 STREET ADDRESS | 6.4 CITY-ST-ZIP |
|-----------|---------------------|--------------------------|------------------------|-----------|----------|--------------------|-----------------|-----------|----------|--------------------|-----------------|-----------|----------|--------------------|-----------------|-----------|----------|--------------------|-----------------|-----------|----------|--------------------|-----------------|
| P/T/S/D | Nelson Garcia-Mella | 3643 Winding Lake Circle | Orlando, Florida 32825 | | | | | | | | | | | | | | | | | | | | |
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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 supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath. 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

President

9/2/99

CR2E034 (11/98)

Pg. 2 of 2

GRAHAM, CLARK, JONES, BUILDER, PRATT & MARKS
ATTORNEYS AT LAW

888 NORTH NEW YORK AVENUE
POST OFFICE DRAWER 1890
WINTER PARK, FLORIDA 32780
TELEPHONE (407) 647-4455
TELECOPIER (407) 740-7083

J. LINDSAY BUILDER, JR.
SCOTT D. CLARK
WILLIAM A. DAVIS, JR.
DOUGLAS K. GARTENLAUB
JESSE E. GRAHAM
JESSE E. GRAHAM, JR.
JESSICA K. HEW
FREDERICK W. JONES
JEFFREY L. KAPLAN
HOWARD S. MARKS
SAMUEL M. NELSON
JAMES R. PRATT
GEOFFREY D. WITHERS

September 9, 1999

VIA FEDERAL EXPRESS

Ms. Michelle Miligan
Division of Corporations
409 East Gaines Street
Tallahassee, Florida 32399

PA8000029676

Re: Profit Corporation Annual Report - 1999
Nelson Garcia-Mella
Our File No. 4994-2

Dear Michelle:

Enclosed herewith please find check number 008527 in the amount of \$550.00 for the Filing of the enclosed Profit Corporation Annual Report for 1999 for European Royal Furniture, Corp. Per our conversation of this date, I have enclosed a copy of our letter of August 9, 1999, copy of the 1999 Profit Corporation Annual Report and a copy of the unsigned check dated August 9, 1999. I understand that the check, along with the original form, was returned to the 3643 Winding Lake Circle, Orlando, Florida 32825 address. Since our client is out of town, we have been unable to reach him by phone to retain the original document. Per our conversation of this date, I understand you will be able to file this 1999 Annual Report on Friday, September 10, 1999. Please send us confirmation of this filing via fax on this date.

Michelle, I appreciate your help in this matter so much. Should you have any questions, please do not hesitate to give me a call.

Sincerely,



Mrs. Judy Rish
Legal Assistant to Jeffrey L. Kaplan

Vjrr

Enclosures

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