

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

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AND
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7/7/99

99 OCT 22 PM 1:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P 98000061195 ✓ 1. Corporation Name FURNITURE & ACCESSORIES INC.			
Principal Place of Business 10000 PINES BLVD. PEMBROKE PINES, FLORIDA 33024		Mailing Address 722-99 90002 014 DO NOT WRITE IN THIS SPACE	
2. Principal Place of Business 21 ABOVE Suite, Apt. #, etc.	2a. Mailing Address 26 ABOVE Suite, Apt. #, etc.	3. Date Incorporated or Qualified JULY 10, 1998	
22 City & State	27 City & State	4. FEI Number 52-211 0142	Applied For ☐ Not Applicable
23 Zip	28 Country	5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
24 Zip	25 Country	6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
9. Name and Address of Current Registered Agent SOUTH FLORIDA REGISTERED AGENTS INC. 200 EAST LAS OLAS BLVD #1900 FT LAUDERDALE FLORIDA 33301		8. This corporation owes the current year intangible Personal Property Tax. ☐ Yes ☒ No	
10. Name and Address of New Registered Agent		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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT JANET COLE 10000 PINES BLVD PEMBROKE PINES FLA. 33024	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	☐ Change ☐ Addition

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 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: Janet Cole, Pres
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/7/99 954-442-1313
Date Daytime Phone #

CR2E034 (11/98)

7-

Pg 2 of 3

7-7-99

Att: Carolyn,

We never received
the 1999 Profit Corp
Annual Report
Pachet, per your
instructions find our
check for \$150⁰⁰.
Thanks -

Pg 301 3
October 14, 1999

Dear Michelle Milligan

Per our telephone conversation of today, enclosed please find the Annual Report, dated 7-7-99, together with my note stating that we never received the 1st Annual Report notice.

Please accept this letter and file my annual report.

I thank you for your past courtesies, and if you would be so kind to acknowledge this letter and set my mind at ease

Very Truly yours,
Furniture Accessories, Inc.
Janet Cole, Pres.

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