

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 21, 2003 8:00 am
Secretary of State

0436663 AV

DOCUMENT # P98000099518

1. Entity Name
DIRECT BUSINESS FURNITURE & INTERIORS, INC.



Principal Place of Business
1120 HOLLAND DRIVE STE 14
BOCA RATON FL 33487

Mailing Address
1120 HOLLAND DR
SUITE 14
BOCA RATON FL 33487
US

Paramount Office Furniture

2. Principal Place of Business
103 Commerce Road

3. Mailing Address
Same as #2

Suite, Apt. #, etc.
Roynton Bch

Suite, Apt. #, etc.

City & State
Florida

City & State

Zip
33435

Country

Zip

Country

4. FEI Number 65-0875658

Applied For

Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

BULLIS, TIMOTHY J
4100 N. POWERLINE RD., SUITE T 4-5
POMPANO BCH FL 33073

7. Name and Address of New Registered Agent

Name *Bullis, Timothy J*
Street Address (P.O. Box Number is Not Acceptable)
6763 W. Calumet Cir.
LakeWorth, FL 33467
City *FL* Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Timothy J Bullis*
Signature, typed or printed name of registered agent and title if applicable.

President
(NOTE: Registered Agent signature required when reinstating)

4/17/03
DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE ☐ Delete
NAME *D BOLLIS, TIMOTHY J.*
STREET ADDRESS *7420 PRESCOTT LANE*
CITY-ST-ZIP *LAKE WORTH FL 33467*

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME *Bullis, Timothy J*
STREET ADDRESS *6763 W Calumet Cir*
CITY-ST-ZIP *LakeWorth, FL 33467*

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Timothy J Bullis*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/17/03 *561 862 0123*
Date Daytime Phone #

CR2E034 (10/02)