

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000031795

FILED  
May 01, 2004  
Secretary of State

Entity Name: ELEGANT CUSTOM FURNITURE, INC.

## Current Principal Place of Business:

1611 W MCNAB RD  
POMPANO BEACH, FL 33069

## New Principal Place of Business:

## Current Mailing Address:

1611 W MCNAB RD  
POMPANO BEACH, FL 33069

## New Mailing Address:

FEI Number: 65-0936795

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MEDINA, PEDRO PRES.  
970 SW 68TH AVENUE  
PLANTATION, FL 33317

## Name and Address of New Registered Agent:

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: MEDINA, PEDRO JR.  
Address: 970 SW 68TH AVENUE  
City-St-Zip: PLANTATION, FL 33317

Title: D ( ) Delete  
Name: MEDINA, JOEL  
Address: 5204 S.W. 87TH AVE.  
City-St-Zip: COOPER CITY, FL 33328

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PEDRO MEDINA

PRES

05/01/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date