

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000059296

FILED
Apr 11, 2005
Secretary of State

Entity Name: DAVID DIQUOLLO FURNITURE MAKER, INC.

Current Principal Place of Business:

450-C CONE RD
MERRITT ISLAND, FL 32952

New Principal Place of Business:

Current Mailing Address:

1440 EEL AVE.
MERRITT ISLAND, FL 32952

New Mailing Address:

FEI Number: 59-3591031

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DIQUOLLO, DAVID
450-C CONE RD
MERRITT ISLAND, FL 32952 US

Name and Address of New Registered Agent:

DIQUOLLO, DAVID
1440 EEL AVE.
MERRITT ISLAND, FL 32952 US

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: DAVID DIQUOLLO

04/11/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: DIQUOLLO, DAVID
Address: 1440 EEL AVE
City-St-Zip: MERRITT ISLAND, FL 329525735

Title: VP () Delete
Name: DIQUOLLO, RUENRUDEE L
Address: 1440 EEL AVE.
City-St-Zip: MERRITT ISLAND, FL 32952

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: DAVID DIQUOLLO

PSTD

04/11/2005

Electronic Signature of Signing Officer or Director

Date