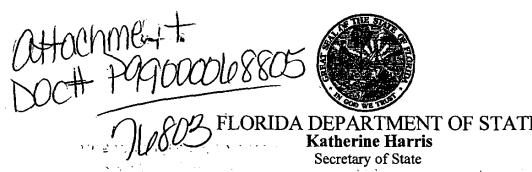
2001 UNIFORM BUSINESS REPORT (UBR)

## Jul 25, 2001 8:00 am **Secretary of State** DOCUMENT # P99000068805 05-17-2001 90415 034 \*\*\*150.00 M & H FURNITURE CORPORATION Principal Place of Business Mailing Address 9250 BAYMEADOWS ROAD, SUITE 230 9250 BAYMEADOWS ROAD, SUITE 230 JACKSONVILLE FL 32256-1813 JACKSONVILLE FL 32258-1813 3. Mailing Address 9244 ARLINGTON EXPRESSWAY 2. Principal Place of Business 9244 ARLINGTON EXPRESSWAY Suite, Apt. #, etc. Suite, Apl. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 66-0574070 JACKSONVILLE, FL JACKSONVILLE, Not Applicable <sup>Zip</sup>32225 Country Country \$8.75 Additional ₹3225 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent COLEMAN, C. RANDOLPH Street Address (P.O. Box Number is Not Acceptable) 9250 BAYMEADOWS ROAD, SUITE 230 JACKSONVILLE FL 32256 Zip Code 8. Are above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. **S**ANATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. ☐ Addition TITH F ☐ Change Delete TITLE NAME NAME SALEM, HAKIMA STREET ADDRESS STREET ADDRESS FURNITURE PLAZA, FOUR WINDS PLAZA CITY-ST-ZIP CITY-ST-ZIP ST. THOMAS VI 00802 ☐ Addition TIME TITLE ☐ Delete NAME NAME SALEM, MARWAN STREET ADDRESS STREET ADORESS FURNITURE PLAZA, FOUR WINDS PLAZA CITY\_ST\_ZIP CITY-ST-ZIP ST.-THOMAS VI 00802 ☐ Addition ☐ Change Delete TITLE TITLE NAME NAME SALEM, MOHAMAD-STREET ADDRESS STREET ADDRESS FURNITURE PLAZA, FOUR WINDS PLAZA CITY-ST-ZIP CITY-ST-ZIP ST. THOMAS VI 00802 ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME SALEM, MORAD STREET ADDRESS STREET ADDRESS FURNITURE PLAZA, FOUR WINDS PLAZA CITY-ST-ZIP CITY-ST-ZIP ST. THOMAS VI 00802 ■ Addlion Delete TITLE ☐ Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Chance ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filling 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 of tristee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if nanged, or on an attachmen

FILED



May 30, 2001

M & H FURNITURE CORPORATION 9250 BAYMEADOWS ROAD, SUITE 230 JACKSONVILLE, FL 32256-1813

Subject: M & H FURNITURE CORPORATION

Reference

P99000068805

Number:

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report has not been filed and a copy is being returned for the following correction(s):

The annual report/uniform business report must be signed by an officer or director of the corporation.

TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 488-9000.

/mm

ANNUAL REPORTS SECTION