FILED
Apr 20, 2007 08:00 AM
Secretary of State

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # S06913

1. Entity Name
JONDEL CUSTOM FURNISHING, INC.

Principal Place of Business	Mailing Address
1160 N.E. 160TH ST. MIAMI, FL 33162-5408	1160 NE 160TH ST MIAMI, FL 33162 US

DO NOT WRITE IN THIS SPACE

04162007 No Chg-P CR2E034 (11/06)

4. FEI Number
65-0219012

☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

DON HARRISON
9600 CUTLER RIDGE DR
MIAMI, FL 33157

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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 _____ DATE _____
Signature required when name of registered agent is changed. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2007 Fee will be $550.00

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

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	HYLTON, JOHN
STREET ADDRESS	1770 N.E. 140TH ST.
CITY-ST-ZIP	MIAMI, FL
TITLE	P
NAME	JOHNSON, DELROY
STREET ADDRESS	1770 NE 140TH ST
CITY-ST-ZIP	MIAMI, FL
TITLE	T
NAME	JOHNSON, DELROY
STREET ADDRESS	1160 NE 160TH ST.
CITY-ST-ZIP	MIAMI, FL
TITLE	D
NAME	HYLTON, JOHN
STREET ADDRESS	1770 NE 140TH ST.
CITY-ST-ZIP	MIAMI, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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05/01/07-80042-005 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: John Hylton JOHN HYLTON 4/17/2007 (305)769-1116
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR — Date — Daytime Phone #