

**2008 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jul 14, 2008 8:00 am**  
**Secretary of State**

07-14-2008 90033 019 \*\*\*150.00

**DOCUMENT # S12905**

1. Entity Name  
**EUROPEAN FURNITURE REPAIR AND REFINISHING  
INC.**



Principal Place of Business

**612 N. ORANGE AVE.  
BLDG. B1  
JUPITER, FL 33458 US**

Mailing Address

**612 N. ORANGE AVENUE  
BLDG. B1  
JUPITER, FL 33458 US**

**DO NOT WRITE IN THIS SPACE**



07082008 No Chg-P CR2E034 (11/05)

4. FEI Number  
**65-0233221**

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

**PANDOLFO, SEBASTIANO  
12395 182ND PLACE NORTH  
JUPITER, FL 33478**

**DO NOT WRITE  
IN THIS SPACE**

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 \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$550.00  
Due by September 12, 2008**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **D**  
NAME **PANDOLFO, SEBASTIANO**  
STREET ADDRESS **12395 182ND PLACE NORTH**  
CITY-ST-ZIP **JUPITER, FL 33478**

TITLE **D**  
NAME **PANDOLFO, RITA**  
STREET ADDRESS **12395 182ND PLACE NORTH**  
CITY-ST-ZIP **JUPITER, FL 33478**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**DO NOT WRITE  
IN THIS SPACE**

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: \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**7/7/08 (56-575-6725**  
Date Daytime Phone #

TO Whom it may Concern ATTACHMENT 7/1/08

I mailed the Original Application  
with a CK for 150.00 on April 13/08  
but because of Postal Service Error  
and failed to Delivered it to your  
office location and never came back  
to me. it most got lost, CK and  
Application (please waive the late  
fee and penalties) (not my fault.

Thank you so much for your  
understanding

SEBASTIAN PADOLO - Luis Padofo.

a replacement CK is send. \$150.00

I spoke to Mr. Gary

European Furniture Repair & Refinish INC,