## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# S41314

FILED Feb 24, 2005 Secretary of State

Entity Name: DYNASTY FURNITURE MANUFACTURING, INC.

Current Principal Place of Business:					New Principal Place of Business:			
4700 NW 1	5 AV							
BAY 4 FT LAUDE	RDALE, FL 3	3309	US					
Current Mailing Address:					New Mailing Address:			
4700 NW 1	5 AV							
BAY 4	RDALE, FL 3	3309	US					
FEI Number: 65-0253588 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )								of Status Desired ( )
						nd Address of New Registered Agent:		
		Jurren	t Registered Agent:		Name and	Address of	New Registe	ered Agent:
DICUIA, EDWARD 4700 NW 15 AVE BAY 4 FT LAUDERDALE, FL 33309 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:								
Electronic Signature of Registered Agent							Dat	te
Election Cam	paign Financin	g Trust	Fund Contribution ( ).					
OFFICERS AND DIRECTORS:					ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	P ( ) DICUIA, EDWA 3082 NW 72 AV MARGATE, FL				Title: Name: Address: City-St-Zip:	(	) Change ( ) A	Addition
Title: Name: Address: City-St-Zip:	V ( ) DICUIA, JAMES 5421 RIVERMII LAKE WORTH,	LL			Title: Name: Address: City-St-Zip:	(	) Change ()A	Addition
Title: Name: Address: City-St-Zip:	V () JULIANO, ANTH 9701 NW 2ND CORAL SPRIN	ST			Title: Name: Address: City-St-Zip:	(	) Change()A	Addition
Title: Name: Address: City-St-Zip:	S ( ) JULIANO, KIME 9701 NW 2ND CORAL SPRIN	ST			Title: Name: Address: City-St-Zip:	(	) Change()A	Addition
Title: Name: Address: City-St-Zip:	V ( ) DICUIA, RICHA 4549 NW 60 C COCONUT CRI	Т			Title: Name: Address: City-St-Zip:	(	) Change ()A	Addition
Title: Name: Address: City-St-Zip:	( )	) Delete			Title: Name: Address: City-St-Zip:	T ( DICUIA, DALE 3082 NW 72 A MARGATE, FL	VE	Addition
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: EDWARD DICUIA Ρ 02/24/2005

above, or on an attachment with an address, with all other like empowered.