

2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED
Feb 27, 2007
Secretary of State**

DOCUMENT# S41314

Entity Name: DYNASTY FURNITURE MANUFACTURING, INC.

Current Principal Place of Business:

4700 NW 15 AV
BAY 4
FT LAUDERDALE, FL 33309 US

New Principal Place of Business:

Current Mailing Address:

4700 NW 15 AV
BAY 4
FT LAUDERDALE, FL 33309 US

New Mailing Address:

FEI Number: 65-0253588 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DICUIA, EDWARD
4700 NW 15 AVE
BAY 4
FT LAUDERDALE, FL 33309 US

Name and Address of New Registered Agent:

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

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DICUIA, EDWARD,
Address: 3082 NW 72 AVENUE
City-St-Zip: MARGATE, FL 33063 US

Title: V () Delete
Name: DICUIA, JAMES
Address: 5421 RIVERMILL
City-St-Zip: LAKE WORTH, FL 33463 US

Title: V () Delete
Name: JULIANO, ANTHONY
Address: 11311 NW 25 ST
City-St-Zip: CORAL SPRINGS, FL 33065 US

Title: S () Delete
Name: JULIANO, KIMBERLY
Address: 11311 NW 25 ST
City-St-Zip: CORAL SPRINGS, FL 33065 US

Title: V () Delete
Name: DICUIA, RICHARD
Address: 4549 NW 60 CT
City-St-Zip: COCONUT CREEK, FL 33073 US

Title: T () Delete
Name: DICUIA, DALE
Address: 3082 NW 72 AVE
City-St-Zip: MARGATE, FL 33063 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

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 Chapter 119, 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: DALE DICUIA

T

02/27/2007

Electronic Signature of Signing Officer or Director

_____ Date