FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

NAME

STREET ADDRESS

SIGNATURE:

CITY-ST-ZIP

FILED May 08 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # (5)S65832 TAMIAMI FURNITURE, INC. Principal Place of Business Mailing Address 12578 S.W. 8TH ST. 12576 S.W. 8TH ST. MIAMI FL 33184 MIAMI FL 33184 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/12/1991 2. Principal Place of Business 2a. Mailing Address 4. FEI Numbe Applied For 21 65-0284929 Not Applicable \$8.75 Additional Suite, Apt. #, etc Suita, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Ziρ Country This corporation owes or has paid the ourrent year Intangible 24 25 29 30 Personal Property Tax due June 30. □ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name **GUERRA, GUILLERMO** 12576 S.W. 8TH DR. 82 Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33184** 83 84 City Zip Code 11. Pursuant to the provisions of Sections 607 0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) CR2E034 (10/97 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition TITLE 1.1 TITLE **GUERRA, GUILLERMO** 1.2 NAME NAME STREET ADDRESS 12576 S.W.8TH ST. 1.3 STREET ADDRESS CITY-ST-ZIP MIAMI FL 1.4 CITY-ST-ZIP DELETE Addition 2 1 TITLE TITLE 2.2 NAME NAME STREET ADDRESS 23 STREET ADDRESS 2.4 DITY-ST-ZIP CITY-ST-ZIP DELETE Change 3.1 TITLE Addition 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS City-St-ZiP 34. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 44 CITY-ST-ZIP DELETE Addition TITLE 5.1 TITLE NUME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE

6.2 NAME

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

6.3 STREET ADDRESS 64 CITY-ST-ZIP