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

PROFIT **CORPORATION ANNUAL REPORT** 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S88257

(8)

A & C FURNITURE DISCOUNTS, INC.

FILED
Apr 25 1997 8:00am
Secretary of State

Data Issuer and an Outsided On Data of Lost Danast

Principal Place of Business 4100 WEST COLONIAL DRIVE ORLANDO FL 32808 US		Mailing Addres	ss			L HODRIBUM VALI TOLIOF FORMA LINDOT BLILLI HOBEL WYDAL BYDAL BYDAL BUDAL WYDAL DIGILL IAMA		
		4100 WEST COL ORLANDO FL 33 US			·			
US		03			3. Date Incorporated or Qualified 10/18/1991	3a. Date of Last Rep 03/28/1996	ort	
2. Principal Pl	ace of Business	2a. Mailing Add	Iress		4. FEI Number		ied For	
21		26			59-3087357 Not Applicable			
Suite, Apt. #, etc.		Suite, Apt	li, etc.		5. Ccrtificate of Status Desired S8.75 Additional Fee Required			
City & State	9	City & State	· · · · · · · · · · · · · · · · · · ·		6. Election Campaign Financing	\$5.00 M	av Be	
23		28			Trust Fund Contribution	Added to Fees		
Zip	Country	Zip		Country	8. This corporation has liability for	intangible tax under s. 1	99.032.	
24	25	29	30			☐ Yes ☐ No	.	
	9. Name and Address of Curre				10. Name and Address of New Re	gistered Agent		
4100 ORL	ESTE, ARNOLD WEST COLONIAL DRIVE ANDO FL 32808			82 Street 83 84 City	Address (P.O. Box Number is Not Acceptal	C(RC/4 32)03 FL B5 200	}	
l office or r	to the provisions of Sections 607.05 egistered agent, or both, in the Sta m familiar with, and accept the obt Signature, typed or printed hards of registered in	te of Horida, Such cha igations of, Section 60	inge was author 7.0505, Florida S	Statutes.	corporation submits this statement for the poration's board of directors. I hereby acce	ourpose of changing its rept the appointment as re	registered gistered	
12.		ND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS	IN 12	
TITLE	P		DELETE 1	.1 THLE	ARNOLD Cele 1555 Royald APOPKA PI	5 Change	Addition	
NAME	CELESTE, ARNOLD		1	.2 NAME	VICE PRUSIC	CACLO		
STREET ADDRESS	469 BOXWOOD CT.		1	.3 STREET ADDRESS	1222		-	
CITY-ST-ZIP	KISSIMMEE, FL 34743			.4 CITY- \$1 - 7\P	A POPKA F	5210:	>	
TITLE				.1 TITLE		Change	Addition	
NAME			2	.2 NAME	ļ			
STREET ADDRESS			2	3 STREET ADDRESS	1		i	
CITY-ST-ZIP				. 4 CITY - ST - ZIP				
TITLE				I.1 TITLE		Change	Addition	
NAME			3	I.2 NAME				
STREET ADDRESS			3	3 STREET ADDRESS				
CITY-ST-ZIP			3	I.4. CITY - ST - ZIP				
TITLE				I.1 TITLE		☐ Change	Addition	
NAME			4	I. 2 NAME				
STREET AODRESS			4	L3 STREET ADDRESS				
CITY-ST-ZIP				I.4 CITY - ST - ZIP				
TITLE				i.1 TITLE		☐ Change	Addition	
NAME			li i	o.2 NAME				
STREET ADDRESS				3.3 STREET ADDRESS				
CITY-ST-ZIP				5.4 CITY-ST-ZIP				
TITLE		<u> </u>		3.1 TITLE		☐ Change	Addition	
NAME		<u>—</u>		3.2 NAME			-	
ļ.			4	33 STREET AUDRESS				
STREET ADDRESS								
CITY-ST-ZIP		Construction and the stiff of the second		3.4 CITY - S1 - 7IP	etated in Section 119.07/3/(i) Florida Statute	on I further earlify that th		

I do nereby 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.