

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Merham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 APR 13 PM 2:48

DOCUMENT # **S91286** (2)

1. Corporation Name

FALLS NATUZZI LEATHER GALLERY-WEST PALM, INC.

Principal Place of Business

**2271 PALM BCH LAKES BLVD
WEST PALM BCH FL 33409
US**

Mailing Address

**900 PARK CENTRE
SUITE 444
MIAMI FL 33169
US**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

11/01/1991

3a. Date of Last Report

01/25/1994

4. FEI Number

65-0301524

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

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

8. This corporation has liability for intangible tax under § 199.032,
Florida Statutes

☒ Yes ☐ No

9. Name and Address of Current Registered Agent

**SALEM, ERIC
2271 PALM BEACH LAKES BLVD.
WEST PALM BEACH FL 33409**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 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 reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**PD
SALEM, ERIC
2271 PALM BEACH LAKES BL
W. PALM BEACH FL**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**VD
SALEM, FLORENCE
2271 PALM BEACH LAKES BL
W. PALM BEACH FL**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**S
SALEM, ROBBIE
2271 PALM BEACH LAKES BL
W. PALM BEACH FL**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**T
SALEM, RENEE
2271 PALM BEACH LAKES BL
W. PALM BEACH FL**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 in an attachment with an address.

SIGNATURE:

(Signature, typed or printed name of signing officer or director)

Date

(Typed Name)