

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAY 11 AM 10:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # V19219

(7)

1. Corporation Name

CONTRACT FURNISHINGS, INC.

Principal Place of Business

5740 SW 114TH TERRACE
MIAMI FL 33156

Mailing Address

5740 SW 114TH TERRACE
MIAMI FL 33156

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
03/05/1992

3a. Date of Last Report
04/28/1994

4. FEI Number
65-0318039

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 alternative tax under a 1994 U.S.
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21

2a. Mailing Address

26

State Apt # etc

State Apt # etc

22

City & State

27

City & State

23

28

24

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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MEYERSON, PAULA
5740 SW 114TH TERRACE
MIAMI FL 33156

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 of person accepting appointment as registered agent or both, if applicable, must be signed by the person accepting appointment as registered agent.)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.

12.1	D
NAME	MEYERSON, PAULA
STREET ADDRESS	5740 SW 114TH TERRACE
CITY, ST, ZIP	MIAMI FL
12.2	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
12.3	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
12.4	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
12.5	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
12.6	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

13.1	Change	Addition
13.2	Change	Addition
13.3	Change	Addition
13.4	Change	Addition
13.5	Change	Addition
13.6	Change	Addition
13.7	Change	Addition
13.8	Change	Addition
13.9	Change	Addition
13.10	Change	Addition

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and that it is true and correct. 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, on this filing with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Paula Meyerson, Paula MEYERSON 5/6/95 305-665-4803