

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Mar 23, 1999 8:00 am  
Secretary of State

03-23-1999 90063 026 \*\*\*150.00

DOCUMENT # V21737

1. Corporation Name

ROSIER UPHOLSTERY, INC.

Principal Place of Business

1101 1/2 29TH AVENUE WEST  
BRADENTON FL 34205  
US

Mailing Address

1101 1/2 29TH AVENUE WEST  
BRADENTON FL 34205  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/06/1992

4. FEI Number

65-0321522

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 owes the current year Intangible  
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 3401 RIVERVIEW BLVD.  
Suite, Apt. #, etc.

2a. Mailing Address

26 3401 RIVERVIEW BLVD.  
Suite, Apt. #, etc.

City & State

23 BRADENTON, FL

City & State

28 BRADENTON, FL

Zip

24 34205

Country

25 MANATEE

Zip

29 34205

Country

30 MANATEE

9. Name and Address of Current Registered Agent

HENDRICKSON, ROBERT A.  
1101 1/2 29TH AVENUE WEST  
BRADENTON FL 34205

10. Name and Address of New Registered Agent

81 Name

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

3401 RIVERVIEW BLVD.

83

84 City BRADENTON

FL

85 Zip Code 34205

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)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME D  
HENDRICKSON, ROBERT A.  
STREET ADDRESS 1101 1/2 29TH AVENUE W.  
CITY-ST-ZIP BRADENTON FL

TITLE ☐ DELETE

NAME D  
LEE, RONALD C.  
STREET ADDRESS 1101 1/2 29TH AVENUE W.  
CITY-ST-ZIP BRADENTON FL 34205

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

3401 RIVERVIEW BLVD.  
BRADENTON, FL 34205

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3401 RIVERVIEW BLVD.  
BRADENTON, FL 34205

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I hereby 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, with all other like empowered.

SIGNATURE   
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-22-99  
Date Daytime Phone #

CR2034 11/98