2001 UNIFORM BUSINESS REPORT (UBR) Sep 12, 2001 8:00 am Secretary of State DOCUMENT # L44605 1. Entity Name 09-12-2001 90011 001 ***150.00 JOE VOLPE CUSTOM FLOORS, INC. Principal Place of Business Mailing Address 7025 CRYSTAL BEACH ROAD 7025 CRYSTAL BEACH ROAD WINTER HAVEN FL 33880-152 WINTER HAVEN FL 33880-152 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-2995304 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name VOLPE, JOSEPH R. Street Address (P.O. Box Number is Not Acceptable) 7025 CRYSTAL BEACH ROAD WINTER HAVEN FL 33880 City Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. **SIGNATURE** Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$550.00 10. Election Campaign Financing \$5.00 May Be Tax filling requirement and elects to do so. After September 12, 2001 Fee will be \$750.00 Trust Fund Contribution. П Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE Delete TITLE ☐ Change Addition VOLPE, JOSEPH R. NAME NAME STREET ADDRESS 7025 CRYSTAL BEACH ROAD STREET ADDRESS CITY-ST-ZIF WINTER HAVEN FL CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change NAME NAME STREET ADDRESS CITY-ST-ZIP

☐ Addition ☐ Addition STREET ADDRESS CITY-ST-ZIP TITI F ☐ Delete TITLE □ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME

I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 11 or Block 12 if

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

8-10-0/ 863-293-4567

AHachhert

Joe Volpe Custom Floors, Inc.
"Floor the People"

Phone: 863-293-4567 ~~ Fax: 863-292-9377

775400

9/7/01

Division of Corporations
Uniform Business Report Filings
P. O. Box 1500
Tallahassee, FL 32302-1500

Dear Sirs,

Ther a phone conversation with your office on Friday I am enclosing a check # 10423 for \$150.00. We never received the first notice and have had our mail stolen from our mailbox a few times during that time.

Thank you for your cooperation in this matter. We apoligize for the delay.

Joseph Jolpe

Joe Volpe