2001 UNIFORM BUSINESS REPORT (UBR)

Apr 11, 2001 8:00 am Secretary of State DOCÚMENT # P0000013539 INTERNATIONAL FLOORING, INC. 04-11-2001 90137 034 ***150.00 Principal Place of Business Mailing Address 4708 ABACA ST. 4708 ABACA ST. ORLANDO FL 32808 ORLANDO FL 32808 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For Not Applicable Zip Country Country \$8.75 Additional Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name ZIMMERMAN, VIRGINIA A Street Address (P.O. Box Number is Not Acceptable) 4708 ABACA ST. ORLANDO FL 32808 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. 4-9-01 (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. immerman Virginia A [Defiange | Addition 593 Clark St. Suite 103 Delete TITI F TITLE ZIMMERMAN, VIRGINIA A NAME NAME STREET ADDRESS STREET ADDRESS 4708 ABACA ST. Popka, Fl. 32703 CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32808 ZIMMERNAN, Chris Genange [0593 clark St. Suite 103 Delete TITLE TITLE ZIMMERMAN, CHRIS NAME NAME STREET ADDRESS STREET ADDRESS 4708 ABACA ST. Apopka, Pl. 32703 CITY-ST-7IP CITY-ST-ZIP ORLANDO FL 32808 ☐ Addition TITLE TITLE Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Addition ☐ Change TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS

13. 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 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 changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

SIGNATURE:

Virgin A. Zimminan

4-9-01

(40) 296-7465 Dayline Phone #