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

PROFIT 1996

FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS (4)**DOCUMENT #** 1. Corporation Name J.D.'S FLOOR COVERING, INC. Mailing Address Principal Place of Business 1208 HICKMAN BLVD JACKSONVILLE FL 32216 1208 HICKMAN RD JACKSONVILLE FL 32216 US 3. Date Incorporated or Qualified 3a. Date of Last Report



						09/17/1991		U0/U 1/ 1990	
9 Dringing Pla	ace of Business	2a. Mailing Address				4. FEI Number	L	Ar	oplied For
z, Principal Pia	SCO OF DESTITOSS	26				59-3086241		No	ot Applicable
Suite, Apt.	H, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired		T	Additional equired
City & State		City & State				6. Election Campaign Financing	<u>Γ</u>	\$5.00	May Be
	,	28				Trust Fund Contribution			to Fees
Zip	Country	Zip	Cour	ntry		8. This corporation has liability for in		kunders 1	199.032,
ון י	25	29	30			Florida Statutes Yes			
	9. Name and Address of Curren	t Registered Agent				10. Name and Address of New Re	agistered A	rgent .	
				81	Name				
HOWARD, JEFFREY D.				82	Street Address (P.O. Box Number is Not Acceptable)				
2335 LAKE LUCINA DRIVE WEST									
JACKS	SONVILLE FL 32211			83					
				84	City		FI	85 Zip	Code
				ll.		ation submits this statement for the purp		Solan Hare	nintered offic
	red agent, or both, in the State of Fiori ith, and accept the obligations of, Sect	oa, 5001 change was autic lion 607.0505, Florida Statu	ites.	ООГРО	oration's board	, , , , , , , , , , , , , , , , , , , ,	DATE	registered a	agent. ram
	Signature, typed or printers name of registered again		(NOTE: Frighting	a Agent	r signature required	ADDITIONS/CHANGES TO OFF	ICERS AND	DIRECTOR	RS IN 12
12.	OFFICERS AN	DELETE	1, 1 7	TITLE				Change	Addition
11TLE	HOWARD, JEFFREY D.	ш	1.2 N.						
NAME	1208 HICKMAN RD				ADDRESS				
STREET ADDRESS	JACKSONVILLE FL			III Y - SI					
CITY - S1 - ZIP TITLE	VSD	[] DELFIE	2 1 1					Change	☐ Addition
NAME	BECK, JAMES E.		2.2 N	IAME					
	DECINI UNITED C.								
			235	STREET	ADDRESS				
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certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall rave the same logar effect a 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 appears in Block 12 or Block 13 if changed, or or, an attachment with an address.

Jeffrey W. Howard