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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CORPORATION  
ANNUAL REPORT  
1995



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

DOCUMENT # 406365 (7)  
1. Corporation Name  
SZOLD'S MODERN FLOOR COVERING, INC.

Principal Place of Business Mailing Address  
4602 E BROADWAY 4602 E BROADWAY  
TAMPA, FLORIDA 33605 TAMPA, FLORIDA 33605

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 08/07/1972 3a. Date of Last Report 04/12/1994  
4. FEI Number 59-1413758 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 intangible tax under S. 199.032, Florida Statutes  Yes  No

2. Principal Place of Business 2a. Mailing Address  
21 4905 MELROSE AV 26 4905 MELROSE AV  
Suite, Apt. #, etc. Suite, Apt. #, etc.  
22 TAMPA 27 TAMPA  
City & State City & State  
23 TAMPA FL 28 TAMPA FL  
Zip Country Zip Country  
24 33629 25 U.S. 29 33629 30 US

9. Name and Address of Current Registered Agent  
SZOLD, FRANK  
4602 E BROADWAY  
TAMPA FL

10. Name and Address of Now Registered Agent  
81 Name SANDRA ROSENBLUM  
82 Street Address (P.O. Box Number is Not Acceptable) 4905 MELROSE AV.  
83  
84 City TAMPA FL 85 Zip Code 33629

11. Pursuant to the provisions of Sections 607.0592 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 607.0305, Florida Statutes.  
SIGNATURE *Sandra Rosenblum* SANDRA ROSENBLUM 2/27/95  
DATE

12. OFFICERS AND DIRECTORS

TITLE	PD
NAME	SZOLD, FRANK
STREET ADDRESS	2108 S CORTEZ
CITY - ST - ZIP	TAMPA FL
TITLE	V
NAME	ROSENBLUM, SANDRA
STREET ADDRESS	4905 MELROSE RD.
CITY - ST - ZIP	TAMPA FL
TITLE	V
NAME	HART, WAYNE
STREET ADDRESS	RT 2 BOX 613
CITY - ST - ZIP	THONOTOSASSA FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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 of this report, or on an attachment with an acknowledgment.

SIGNATURE: *Sandra Rosenblum* SANDRA ROSENBLUM 2/27/95 813-296-0503  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE