2003	UNIFORM BUSIN	NESS REPO	RT (	UBR)							
DOCUMENT# P0000051217  1. Entity Name  ALVES RELIABLE FLOORING, INC.						O3 FEB 18 PM 3:31					
Principal Pla	ce of Business	Mailing Address  3231 COCOPLUM CIRCLE				SECRETARY OF STATE TALLAHASSEE, FLORIDA					
3231 GOC	OPLUM CIRCLE					Carrie My	IUA				
COCONUT CREEK FL 33063		COCONUT CREEK FL 33063									
2 Deigning C	Place of Business										
		3. Mailing Address									
Suite Apt	.#, etc,	Suite, Apt. #, etc.				DO NOT WRITE IN T	HIS SPACE				
City & Sta	ie e	City & Stale		***************************************	4. F	El Number <b>65-1030256</b>		Applied For Not Applicable			
Zip	Country	Zip	Countr	у	5. C	Certificate of Status Desired	\$8.75 A Fee Requ	Additional			
	6. Name and Address of Current R	egistered Agent			7. N	lame and Address of New Registe					
TAX HOL	USE CORPORATION			Name							
	EDERAL HIGHWAY			Street Addres	s (P 0. B	Box Number is Not Acceptable)					
POMPAN	NO BEACH FL 33064										
				City			FL Zip C	ode			
8. The above	named entity submits this statement for the	purpose of changing its regis	stered office	e or registered a	agent, or	both, in the State of Florida.					
01031471100											
SIGNATURE.	Signature, typed or printed name of registered a	gent and title if applicable.	(NOTE:Regis	tere Agent signat	ure require	od when reinstating)	DATE				
	pration is eligible to satisfy its intangible	FILE NOW			_	10. Election Campaign Financing	\$5	.00 May Be			
-	requirement and elects to do so.  eria on back)	After MAY 1, 20 Make Check Payab				Trust Fund Contribution.		ded to Fees			
11,	OFFICERS AND DI	RECTORS	12.		AD	DITIONS /CHANGES TO OFFICERS	AND DIRECTO	RS IN 11			
TITLE NAME	PD ALVES, ADRIANO M	Delete	TITLE NAME				Chang	e Addition			
	3231 COCOPLUM CIRCLE COCONUT CREEK FL 33063		- 1	ADDRESS T- ZIP		100012975 12/24/03-0109601	5621 1 ***********************************	in in			
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CITY-ST-ZIP			CITY-S								
TITLE NAME		Delete	TITLE NAME				Change	e Addition			
STREET ADDRESS C:TY-ST-ZIP				ADDRESS							
TITLE		☐ Delete	TITLE				Change	Addition			
NAME STREET ADDRESS			NAME STREET	ADDRESS							
CITY-ST-ZIP		<u></u>	CITY- ST	r- ZIP							
TITLE NAME		Delete	TITLE				Change	e Addition			
STREET ADDRESS CITY-ST-ZIP			STREET CITY-S	ADDRESS F-ZIP							
TITLE		☐ Delete	TITLE				Change	e Addition			
NAME			NAME	ADDRESS							
STREET ADDRESS CITY-ST-ZIP			CITY-S1	3							
indicated of the cor	ertify that the information supplied with thi f on this report or supplemental report <u>is t</u> poration or the receiver or trustee empow r on an attachment with an address, with all o	<u>rue and accurate and that mered to execute this report a</u>	ny signatui	re shall have th	ie same li	egal effect as if made under oath: tha	at Iam an offic	er or director			

SIGNATURE: Advisolation

**ADRIANO M ALVES** 

02/03/03

2002	UNIFORM BUS	SINESS REPO	RT (	(UBF	₹)				
DOCU	MENT# P00000	051217 .							
ALVES RELIABLE FLOORING, INC.									
Principal Plac	ce of Business	Mailing Address							
3231 GOC	OPLUM CIRCLE	3231 COCOPLUN	3231 COCOPLUM CIRCLE COCONUT CREEK FL 33063						
COCONU.	T CREEK FL 33063	COCONUT CREE							
2. Principal P	Place of Business	3. Mailing Address							
Suite Apt.	#, etc,	Suite, Apt, #, etc.	Suite. Apt. #. etc.				E IN THIS	SPACE	
City & Stal	le	City & Stale	•		4. F	El Number		<del> </del>	Applied For
Zip	Country	Zip	Coun	try	5, C	65-1030256 Certificate of Status Desired		\$8.75 Ad	
	6. Name and Address of Curr	rent Registered Agent			7. N	ame and Address of New Re		Fee Requir	ea
			•	Name					
	JSE CORPORATION			Street A	ddress (P 0. B	ox Number is Not Acceptable)			
	EDERAL HIGHWAY						<u></u> .		
POMPAN	IO BEACH FL 33064			City			FL	Zip Co	de
8. The above i	named entity submits this statement f	for the purpose of changing its regi	stered offi	ce or regist	ered agent, or	both, in the State of Florida.			
	·								
SIGNATURE_	Signature, typed or printed name of regi	stared agent and title if applicable.	(NOTE:Reg	gistere Agent	signature require	d when reinstating)		DATE	
9. This corpo	pration is eligible to satisfy its Intang	aible FILE NOV	/! FEE	IS \$150.0	)0	40 Florting Compaign Fig.		25	
Tax filing	requirement and elects to do so.	After MAY 1, 2 Make Check Paya				<ol> <li>Election Campaign Final Trust Fund Contribution</li> </ol>			00 May Be ed to Fees
11.		AND DIRECTORS	12.	opai (illeiv		DITIONS /CHANGES TO OFFIC	CERS AND	DIRECTOR	RS IN 11
TITLE	PD	- Delete	TITLE		-	·		Change	Addition
NAME	ALVES, ADRIANO M		NAMI	E ET ADDRESS					
STREET ADDRESS CITY-ST-ZIP	3231 COCOPLUM CIRCLE COCONUT CREEK FL 33063			- ST- ZIP					
TITLE		Delete	TITLE			· · · · · · · · · · · · · · · · · · ·		Change	Addition
NAME STREET ADDRESS			NAME	ET ADDRESS					
CITY-ST-ZIP				-ST-ZIP					
TITLE		☐ Delete	TITLE		-			Change	Addition
NAME			NAM!	E Et address					
STREET ADDRESS CITY-ST-ZIP				ST- ZIP					
TITLE		Delete	TITLE					Change	Addition
NAME			NAME	E ET ADDRESS					
STREET ADDRESS CITY-ST-ZIP				- ST- ZIP					
TITLE		☐ Delete	TITLE	:		<del></del>		Change	Addition
NAME			NAMI						
STREET ADDRESS CITY-ST-ZIP				ET ADDREBS -ST-ZIP					
TITLE		☐ Delete	TITLE					Change	Addition
NAME			NAME						
STREET ADDRESS CITY-ST-ZIP			- 1	ET ADDRESS '-ST-ZIP					
	r		- 1						

13. 1 hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 1 19.07(3)(1), 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 N changed or on an attachment with an address, with all other like empowered.

SIGNATURE:

Schichter 165

ADRIANO M ALVES - PRESIDENT

02/03/03

1. Entity Na	MENT# P	00000051	<u>1ESS REPO</u> 2 <u>1</u> 7		,						
Principal Place of Business Mailing Address											
3231 GOCOPLUM CIRCLE COCONUT CREEK FL 33063  2. Principal Place of Business		E	3231 COCOPLUM CIRCLE								
		3003	COCONUT CREEK FL 33063  3. Mailing Address								
Suite Apt	.#, etc.		Suite. Apt. #. etc.				DO N	OT WRITE IN T	HIS SP	ACE	
City & Sta	ile		City & Stale  Zip Cour		Country		4. FEI Number 65-1030256			- ∔	Applied For Not Applicable
Zip	Coun	try					Certificate of Status D	_		8.75 Add	
	6. Name and Ado	iress of Current Rec	gistered Agent			7. N	lame and Address o	f New Register		<u>'</u>	
TAX HOI	USE CORPORATION				Name						
	EDERAL HIGHWAY				Street Addres	s (P 0. B	Box Number is Not Ac	ceptable)			
	NO BEACH FL 33064										
				ı	City				FL	Zip Cod	łe
		nis statement for the pu	urpose of changing its reg				both, in the State of Fi			DATE	
SIGNATURE _  9. This corpo Tax filing		ted name of registered age tisfy its Intangible	ent and title if applicable.	(NOTE:Registe V! FEE IS 001 Fee wi	\$150.00 II be \$550.00	ure require		orida. Daign Financing		\$5.0	00 May Be d to Fees
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9. This corporate filing (See crite  11.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	Signature, typed or print pration is eligible to sa requirement and elect- iria on back)  PD  ALVES, ADRIANO N	ted name of registered age tisfy its Intangible is to do so.  OFFICERS AND DIR	ent and title if applicable.  FILE NOV After MAY 1, 2 Make Check Paya	(NOTE:Registe N! FEE IS 2001 Fee wi ble to Depa 12. TITLE NAME STREET A	\$150.00 Il be \$550.00 artment of S	ure require 0 State	od when reinstating)  10. Election Camp  Trust Fund Co	lorida. Daign Financing Intribution.	AND DI	\$5.0 Added	d to Fees
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SIGNATURE _  9. This corpo Tax filing	Signature, typed or print pration is eligible to sa requirement and electria on back)  PD  ALVES, ADRIANO N 3231 COCOPLUM C	ted name of registered age tisfy its Intangible is to do so.  OFFICERS AND DIR	FILE NOV After MAY 1, 2 Make Check Paya ECTORS  Delete  Delete	(NOTE:Register  VI FEE IS 2001 Fee will bile to Depail 12.  TITLE NAME STREET A CITY-ST-	STEP Agent signate \$150.00 II be \$550.00 artment of S  DDRESS ZIP  DDRESS ZIP  DDRESS ZIP  DDRESS ZIP	ure require 0 State	od when reinstating)  10. Election Camp  Trust Fund Co	lorida. Daign Financing Intribution.	AND DI	\$5.0 Added RECTOR: Change Change Change	d to Fees  S in 11 Addition Addition Addition Addition Addition

SIGNATURE:\_

ADRIANO M ALVES

02/03/03

FLORIDA DEPARTMENT OF STATE
Division of Corporation
2001 / 2002 Uniform Business Report (UBR)
409 East Gaines Street
Tallahassee, FL 32399

Re: Filing of Uniform Business Report 2001 / 2002 P00000051217 ALVES RELIABLE FLOORING, INC.

To Whom It May Concern:

This letter is to inform you that we have never received a Uniform Business Report 2001 / 2002 form by the mail.

We would like to request you that you forgive all extra fees and penalties other than the primary of \$300.00 and accept the filling of our attached UBR, which has been prepared by our accountant. Also are including the Annual Report from 2003 to certify that we still in business.

Any questions or concern, feel free to contact our accountant at (954) 725-4600 and speak to Mr. Breno Gomes.

Sincerely,

Adriano M. Alves - President

ALVES RELIABLE FLOORING, INC.

3231 Cocoplum Circle Coconut Creek, FL 33063 (954) 554-1780