FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 184584

(1)

GRIFFIN FLOORING COMPANY

Secretary of State

FILED

Jan 26 1998 8:00am

Principal Place of Business Mailing Address									
P.O. BOX 6567 W PALM BCH FL 33405	P.O. BOX 6567 W PALM BCH FL 33405				DO NOT WRITE IN THE	S SPACE			
					3. Date Incorporated or Qualified 04/18/1955	3 31 AGE			
Principal Place of Business	2a. Mailing Address	-			4. FEI Number 59-0748711	Applied For Not Applicable			
Suite, Apt. #, etc. Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Required				
City & State Clty & State				6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees				
Zip Country 24 25	Zip 29	30 30	untry		This corporation owes or has paid the operation of the Personal Property Tax due June 30.	current year Intangible Yes No			
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent				
SCHONBERG, JAMES		3	81	Name		.772			
7529 CLARKE RD. WEST PALM BEACH FL 33406			82	Street Address (P.O. Box Number is Not Acceptable)					
			83						
			84	City	F	85 Zip Code			

11. Pursuant to the provisions of Sections 607.0502 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 607.0505, Florida Statutes.

SIGNATURE										
Skynature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating) DATE										
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFF						
TITLE	P	DELETE .	1.1 TITLE			Addition				
NAME	SCHONBERG, JAMES		1,2 NAME							
STREET ADDRESS	7529 CLARKE RD		1.3 STREET ADDRESS			ŀ				
CITY - ST - ZIP	WEST PALM BEACH FL		1.4 CITY - ST - ZIP							
THILE	D	☐ DELETE	2.1 TITLE		Change	Addition				
NAME	MILLER, JANET R		2.2 NAME							
	2601 BOUNDBROOK BLVD		2.3 STREET ADDRESS		•					
CITY - ST - ZIP	WEST PALM BEACH FL		2. 4 CITY - ST - ZIP							
TITLE		☐ DELETE	3.1 TITLE		☐ Change	Addition				
NAME			3.2 NAME							
STREET ADDRESS			3,3 STREET ADDRESS			+				
CITY - ST - ZIP			3.4. CITY - ST - ZIP							
TITLE		☐ DELETE	4.1 TITLE		Change	Addition				
NAME			4. 2 NAME			1				
STREET ADDRESS			4.3 STREET ADDRESS]				
CITY - ST - ZIP			4.4 CITY-ST-ZIP							
TITLE		☐ DELETE	5.1 TITLE		☐ Change	Addition				
NAME			5.2 NAME							
STREET ADDRESS			5.3 STREET ADDRESS			į				
CITY - ST- ZIP			5.4 CITY - ST - ZIP							
TITLE		☐ DELETE	6.1 TITLE		☐ Change	☐ Addition				
NAME			6.2 NAME							
STREET ADDRESS			6.3 STREET ADDRESS							
CITY - ST - ZIP			6.4 CITY-ST-ZIP							

14. 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 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 if changed, or on an attachment with an address.

SIGNATURE: X January Lines RETHIRE SCHONBERG 1/19/48

CHZEU34 (10/97)