2004 FOR PROFIT CORPORATION ANNUAL REPORT

273994

1. Entity Name FLORIDA TERRAZZO INC

FILED Feb 09, 2004 08:00 AM Secretary of State

Principal Place of Business 1950 MONTE CARLO TRAIL Mailing Address

ORLANDO, FL 32805

PO BOX 555368

ORLANDO, FL 32855-5368 US



DO NOT WRITE IN THIS SPACE

6 Name and Address of Current Registered Agent

4.	FEI Number		Applied For
	59-1024537		Not Applicable
5.	Certificate of Status Desired	\$8.75	

FRENCH, LEWIS E 1950 MONTE CARLO TRAIL ORLANDO, FL 32805	 	

DO NOT WRITE IN THIS SPACE

02032004

The above named entity suithe obligations of registerod		purpose of changing its regist	tered office or re	egistered agent, or bo	th, in the State of Florida. I am familiar with, and accept
SIGNATURE Signature, typed or pri	nted name of registered agent and tills	fapplicable (NOTE, Regist	lered Agoni signature	raquired when reinstating)	CATE
FILE NOWIII FE After May 1, 2004 F		Election Campaign Fir Trust Fund Contribution		\$5.00	
10.	OFFICERS AND DIREC	CTORS			
TITLE PTS MANE FRENCH,LEY STREET ADDRESS 1738 MARKH CITY-ST-ZIP LONGWOOD	IAM GLEN CIR.				
TITLE NAME STREET ADDRESS CITY-ST-ZP					02/10/04-80056-804 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZP				DO	NOT WRITE
TILE NAME STREET ADDRESS CITY-ST-ZIP				IN "	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					· · · · · · · · · · · · · · · · · · ·
BTLE NAME STREET ADDRESS CITY-ST-ZIP					
12. I hereby certify that the inf	ormation supplied with this f	iling does not qualify for the e	exemption states	d in Section 119.07(3)	(i), Florida Statutes. I further certify that the information

12. I nercely dealy that the anormation supposed with this hind does not quality for the exemption state of a section 119-07(3)), histad statutes. Profits the and accurate and that my signature shall have the same legal effect as if made under orabit; that I am an office or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 807, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like impowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

ch 0:

407.422-0721

Daytime Phone ●