## 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # 361147

1. Entity Name

CREATIVE FLOORS OF VERO BEACH, INC.



**FILED** Mar 26, 2003 8:00 am Secretary of State 03-26-2003 90126 019 \*\*\*150.00

Principal Place 1137 OLD DIXI VERO BEACH US	Ε		Mailing Address 1137 OLD DIXIE VERO BEACH FL 32960 US											
2. Principal Pl	ace of Busin	988	3. Mailing Address							##!   #   #10		<u>                                      </u>	∤ <b>@   @   </b>	
Suite, Apt.	#, etc.		Suite, Apt. #, etc.					CHECK HERE IF MAKING CHANGES						
City & State	9		City & State				4. FEI Number 59-1285175			<u> </u>	Applied For Not Applicable			
Zip	Country			Zip Cou				<b>5.</b> Cer	tificate of Statu	ıs Desired		\$8.75 Add Fee Require		
	6. Name	and Address of Current	Registere	d Agent				7. Nar	ne and Addres	s of New R	egistered	Agent	<u> </u>	-
WONKA, DAVE J						Name Street Ac	idress (F	P.O. Box	Number is Not	Acceptable	<u>.</u>			
	DIXIE HWY			1										1
VERO BEA	CH FL 329	60										7:- 0	J_	-
						City			FL Zip Code					
theobligati	named entity ions of regist	y submits this statement to ered agent.	the odrp	ose of changing its	registered o	office or	registere	ed agent	, or both, in the	State of Flo	orida. 1 am	n familiar with,	and accept	
SIGNATURE	Signature, typed	or printed name a registered agent	and title if app	licable. (NOTE	: Registered Ag	ent signatu	re required	when reinst	ating)		DATE			
After	May 1, 200	! FEE IS \$150.00 3 Fee will be \$550.00 Florida Department of	of State	- V - I					9. Election C Trust Fund	ampaign Fir I Contributio	_		00 May Be d to Fees	
10.	- ayabic to	OFFICERS AND		RS	11.			ADDI	TIONS/CHANC	SES TO OFF	ICERS AN	ID DIRECTOR	RS IN 11	1_
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST CORLEY,J 7245 18TH VERO BEA	PARKS I STREET		<b>⊠</b> Delete	TITLE NAME STREET A CITY-ST	ADDRESS -ZIP	DER CORLO 7245 Vers	EY	J. PARKS Street H, FL 31	2966		Change	☐ Addition	00/01/ /10/02
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD	MARGARET R. I STREET		<b>⊠</b> Delete	TITLE NAME STREET A CITY-ST	ADDRESS	7D Work 7188	1, Ten 42ª	LESA C. FOT SW L, Fil 3	<b>√</b>		<b>⊠</b> Change	☐ Addition	j
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V WONKA, 1 2188-42 C VERO BEA	ERESA, C T S.W.		<b>⊠</b> Delete	TITLE NAME STREET A	ADDRESS	ST WON 2185	KA, 1	DAUS J. Cor S Epch, FZ	₩	8	Change		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WONKA, I 2188-42 C VERO BEA	DAVE J. T. S.W.		<b>⊠</b> Delete	TITLE NAME STREET A							☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete	TITLE NAME STREET A	address - Zip			-			☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		o information supplied with		☐ Delete	CITY-ST		200 50	ention 11	0.07(2)(i) Elori	do Statutos	I further c	Change	Addition	

I hereby certify that the information supplied with this filing does not dualify for the exemption stated in Section 119.07(3)(i), 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 of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or or an attachment with an address, with all prior the empowered.

SIGNATURE:

772-569-0290