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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 420993

GONZAL	EZ FLOORING & STONE, I	iNC.			 	61811 81811 81811 8181	# 818 (1 818) 1 88 (
	·			-			
Principal Place	e of Business	Mailing Address					
6760 29TH AVE N. 6760 29TH AVE N. ST PETERSBURG FL 33710 ST PETERSBURG FL 33710						T. V. 27.105	
					DO NOT WRITE IN	THIS SPACE	
	,				3, Date Incorporated or Qualifed 03/13/1973		
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number	1 /	Applied For
21		26			59-1476640	1	Not Applicable
Suite, Apt.	#, etc	Suite, Apt. #, etc.		u ju Mari	5. Certificate of Status Desired	•	Additional Required
City & State	e · · · · · · · · · · · · · · · · · · ·	City & State			6. Election Campaign Financing	\$5.00	0 May Be
23		28			Trust Fund Contribution	,	d to Fees
Zip	Country	Zip	Country		8. This corporation owes the current ye	ar Intangible	
24	25	29	30		Personal Property Tax.	☐ Yes	□No
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Regist	ered Agent	
CON	741 F7 PALAON		81	Name			
GONZALEZ, RAMON			. 82	Street Addre	ss (P.O. Box Number is Not Acceptable)		
6760 29TH AVE N.							
31 P	ETERSBURG FL		83				
			84	City		FL 85 Zip	p Code
agent. I a	m familiar with, and accept the collection of special states of the collection of special states of the collection of th	ations of, Section 607.0505, Flor pulse of little of appropriate. (NOTE:	nda Statutes	t signature required		6/99 TE	
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICER		
TITLE (PVD		1.1 TITLE				e 🗌 Addition
NAME		☐ DELETE				Change	
STREET ADDRESS	GONZALEZ, FRANCISCO	☐ DELETE	1.2 NAME			∐ Cnange	
SIREEI ADDRESS	5220 59TH WAY N.	☐ DELETE		ADDRESS		∐ Cnange	
CITY-ST-ZIP	5220 59TH WAY N. ST PETERSBURG FL		1.2 NAME 1.3 STREET 1.4 CITY- ST				a Addition
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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, with all other like empowered.

6.4 CITY-ST-ZIP

CITY-ST-ZIP

FILED

Apr 19, 1999 8:00 am Secretary of State

04-19-1999 90136 011 ***150.00