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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 449016

(5)

ROBERTO QUALITY FLOORS, INC.

Principal Place of Business 454 S.E. 107H CT. HALEAH FL 33010		Mailing Address 454 S.E. 10TH CT. HALEAH FL 33010-5748							
						3. Date Incorporated or Qualified 03/16/1974		te of Last R	eport
2. Principal	LPtace of Business	2a. Mailing Address				4. FEI Number	ווייי		oplied For
21		26				59-2621994			ot Applicable
Suite Act # etc.		Suile. Apt. #, etc.			5. Certificate of Status Desired			Additional equired	
City & St	tate	City & State				6. Election Campaign Financing		\$5.00	May Be
23		28				Trust Fund Contribution			to Fees
Ζιμ 24	Country 7/p 25 29 30			ry		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No			
	9. Name and Address of Cu	rrent Registered Agent	8	41 11		10. Name and Address of New Re	gistered A	rgent	
	UNNE, ROBERTO)*	1 Name					
	5 S E 4TH ST ALEAH FL 33010		8:	2 Street	Addre	ess (P.O. Box Number is Not Acceptab	ole)		
			8	3			***************************************		
ł			8	4 City				85 Zip I	Code
**************************************				-			FL		
office of agent	ı		authorized b lorida Statut	by the cores.	poratio	ration submits this statement for the p or's board of directors. I hereby accep	of the appoint	ointment as	registered
	Eig store by rid or protect owner of registers			gent signatur	etiupet e	t when reinstating)	DATE		
12.	OFFICERS	AND DIRECTORS DELETE	13.			ADDITIONS/CHANGES TO OFFIC		Change	Addition
TIFLE	MUNNE, ROBERTO	C DECEIE	1.1 TITLE					L_1 Change	Modition
) NAME STREET ADORES	AAE A C ATH AT		1.2 NAMI	ET ADDRESS]				
COY SI ZE	HIALEAH FL		1.3 STRE						
TIBLE	ST	☐ DELETE	2.1 TITLE		╂{			Change	Addition
NAME	MUNNE,JUSTA		22 NAMI			:			
STREET LADDRES	COLO E ATLLOT			ET ADDRESS	1				
C+1Y - S1 - ZIP	HIALEAH FL		2.4 CITY	-S1-7IP					
TOLE		DELETE	3.1 TITLE					Change	Addition
NAME			3.2 NAM	E]]	1.			
STREET ADORES	:S		3.3 STRE	ET ADDRESS					
(01 Y - 51 - 21F			3.4. CITY	- ST - ZIP					
1911 8		☐ DELETE	4 1 TIFLE					Change	Addition
NAME			4. 2 NAM	1E					
STREET FADDRES	*		4.3 STRE	et adoress					
City - St - 74P			4.4 CITY						
THUE		☐ DEFELE	5.1 TITLE				Alice.	Change	Addition
MAME	→		5.2 NAM	E	1				

14. I do horeby 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 efficient or orector 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 chapted. Program attachment with an address.

61 TITLE

6.2 NAME

5.3 STREET ADDRESS 5.4 CITY - ST - ZIP

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

hille

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DELETE

03/29/97

305-888-8950

Change

Addition

FILED

Apr 02 1997 8:00am

Secretary of State