FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 AUG -9 PM 2:31

DOCUMENT # **521054** **(7)**

1. Corporation Name
CROWN FLOORING & CONSTRUCTION CORP.

Principal Place of Business	Mailing Address
7545 WEST 20TH AVENUE HIALEAH FL 33014	7545 WEST 20TH AVENUE HIALEAH FL 33014

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 12/28/1976
3a. Date of Last Report: 04/28/1994

2. Principal Place of Business — 21: 2608 SE 21 Street
2a. Mailing Address — 26: 2608 SE 21 Street
4. FEI Number: 59-1717018 ☐ Applied For ☐ Not Applicable

Suite, Apt. #, etc. — 22:
Suite, Apt. #, etc. — 27:
5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

City & State — 23: Ft. Lauderdale FL
City & State — 28: Ft. Lauderdale FL
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

Zip — 24: 33316
County — 25: Broward
Zip — 29: 33316
County — 30: Broward
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

LOVELL, R. O.
7545 W 20TH AVENUE
HIALEAH FL 33014

10. Name and Address of New Registered Agent

81 Name: Lovell, R. O.
82 Street Address (P.O. Box Number is Not Acceptable)
83: 2608 SE 21 Street
84 City: Ft. Lauderdale **FL** 85 Zip Code: 33316

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	☐ Change ☐ Addition
NAME	LOVELL, HAROLD B	1.2 NAME	President Lovell, Harold B.
STREET ADDRESS	7545 WEST 20TH AVE	1.3 STREET ADDRESS	2608 SE 21 Street
CITY-ST-ZIP	HIALEAH, FL 00000	1.4 CITY-ST-ZIP	Ft. Lauderdale, FL 33316
TITLE	S	2.1 TITLE	☐ Change ☐ Addition
NAME	LOVELL, WILLIAM	2.2 NAME	Secretary Lovell, William
STREET ADDRESS	7545 WEST 20TH AVE	2.3 STREET ADDRESS	2608 SE 21 Street
CITY-ST-ZIP	HIALEAH, FL 00000	2.4 CITY-ST-ZIP	Ft. Lauderdale, FL 33316
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		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 do hereby certify that the information supplied with this filing is voluntarily furnished and 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: Harold B. Lovell 7-12-95 (305) 467-8900
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0083731 CP