

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****FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS****95 APR -6 AM 9:32****DOCUMENT # 579235 (3)**

1. Corporation Name

M & D FLOORING, INC.

Principal Place of Business

**2572 N.E. 191ST STREET
P.O. BOX 630186
MIAMI FL 33163**

Mailing Address

**2572 N.E. 191ST STREET
P.O. BOX 630186
MIAMI FL 33163**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

07/17/1978

3a. Date of Last Report

04/29/1994

4. FEI Number

59-1856098

Applied For

Not Applicable

5. Certificate of Status Desired

☐**\$8.75 Additional
Fee Required**6. Election Campaign Financing
Trust Fund Contribution☐**\$5.00 May Be
Added to Fees**8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes☐ Yes☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

**DONNELLY, RICHARD
2572 N.E. 191ST STREET
N. MIAMI BEACH FL 33180**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP**P
DONNELLY, RICHARD JR.
18320 NE 21ST CT.
N. MIAMI BEACH FL**TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP**VP
DONNELLY, PATRICK
2549 NE 191ST ST., APT 3
N. MIAMI BEACH FL**TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP**ST
DONNELLY, RICHARD SR.
2572 NE 191ST ST.
N. MIAMI BCH. FL**TITLE
NAME
STREET ADDRESS
CITY - ST - ZIPTITLE
NAME
STREET ADDRESS
CITY - ST - ZIPTITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY - ST - ZIP**Leaving Finc.
DONNELLY Richard Jr.
18320 NE 21 CT.
N.M.Bch, Fla.**☒ Change ☐ Addition21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY - ST - ZIP☐ Change ☐ Addition31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY - ST - ZIP**Pres. ST.
DONNELLY Richard Sr.
2572 NE 191 ST.
N. Miami Bch, FL**☒ Change ☐ Addition41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY - ST - ZIP**Sec. Tres
DONNELLY Hannah
2572 NE 191 ST.
N. Miami Bch, Fla.**☐ Change ☒ Addition51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY - ST - ZIP☐ Change ☐ Addition61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY - ST - ZIP☐ Change ☐ Addition

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 110.07(3)(b), 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:

*Hannah Donnelly**Hannah Donnelly**4/3/95**305 9322680*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone Number