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

**PROFIT CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 670131

(2)

DESIGNERS CHOICE IN FLOORS, INC., SOUTH

Principal Place of Business

Mailing Address

## **FILED** Feb 10 1998 8:00am Secretary of State



7520 GRANVILLE DRIVE APT 111 TAMARAC FL 33321		7520 GRANVILLE DRIVE APT 111 TAMARAC FL 33321		DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified		
··_ ·	······································			05/14/1980		
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For	
21 7777 Westview Dr.		26 9777 Westview Dr.		59-1912655	Not Applicable	
Suite, Apt. #, etc.		Suite, Apl. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State  22 Coval Springs		28 Caral Springs		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
<sup>Ζίρ</sup> 24 3307		d29 33076	30 Browna	This corporation owes or has paid the Personal Property Tax due June 30.	Yes No	
	9, Name and Address of Curren	i Hegistered Agent	81 Name	10. Name and Address of New Registe	reo Agent	
752 AP1 TAM	INE, MARILYN 0 GRANVILLE DRIVE 1 111 MARAC FL 33321		82 Street Add 97777	82 Street Address (P.O. Box Number is Not Acceptable) 97777 Ses Tries		
11. Pursuant to office or reagent. Lar SIGNATURE	o the provisions of Sections 607,050/ agistered agent, or both, in the State in familiar with, and accept the obliga Shewi With			poration submits this statement for the purposition's board of directors. I hereby accept the	se of changing its registered appointment as registered	
	Signature typied or grante fragment and deput adjet. OFFICERS AND		E Registered Agent signature requ	ADDITIONS/CHANGES TO OFFICERS	······································	
12.	PST OFFICERS AND	DELETE	13.	S T	Change Addition	
NAME	LEVINE, MARILYN	<b>₽</b> J bittir	1.2 NAME	Lanci Lalitle.W		
STREET ADORESS	7520 GRANVILLE DRIVE		1.3 STREET ADDRESS	777 Westview Dr.	Apt # 1117   8	
CITY-ST-ZIP	TAMARAC FL 33321	1	1.4 CITY - ST- ZIP			
TITLE	D	DELETE	2.1 TITLE	oval Springs, Fl 3	Change ☐ Addition	
NAME	LEVINE, MARILYN		2.2 NAME	· - i Witten	į.	
STREET ADDRESS	7520 GRANVILLE DRIVE		2.3 STREET ADDRESS	177 Westview Dr.	Apt.1117	
CITY-ST-ZIP	TAMARAC FL 33321		2. 4 CITY - ST - ZIP	aval Spainas El	33076	
TITLE		☐ DELETE	31 TITLE	3444	☐ Change ☐ Addition	
NAME			3.2 NAME			
STREET ADDRESS			3 3 STREET ADDRESS			
CITY-ST-ZIP			3.4. CITY - ST - ZIP			
TITLE		DELETE	4.1 TITLE		Change Addition	
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY - ST - ZIP			4.4 CITY-ST-ZIP			
TITLE		☐ DELETE	5.1 TITLE		Change Addition	
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY - ST - ZIP			5.4 CITY-ST-ZIP			
TATLE		DELFTE	61 TITLE		Change Addition	
NAME			62 NAME			
STREET ADDRESS			6 3 STREET ADDRESS			
CITY-ST-ZIP			6.4 CiTY-ST-ZIP		1	

14. Thereby 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 conforation 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 array attachment with an address.

SIGNATURE:

(954)752-8259