



2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 13, 2007 8:00 am
Secretary of State

09-13-2007 90002 007 ***550.00

DOCUMENT # F02000005366 1. Entity Name IFLOOR CORPORATION					
Principal Place of Business 17600 WEST VALLEY HIGHWAY TUKWILA, WA 98188				Mailing Address 17600 WEST VALLEY HIGHWAY TUKWILA, WA 98188	
2. Principal Place of Business - No P.O. Box # Same		3. Mailing Address Cairncross & Hempelmann, P.S.			
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 524 2nd Avenue, Suite 500		09042007 Chg-P CR2E034 (12/06)	
City & State 		City & State Seattle, WA		4. FEI Number 91-1988488	
Zip 		Zip 98104-2323		Country USA	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required					
6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>		
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when re-registering) DATE _____					
FILE NOW!!! FEE IS \$550.00 Due by September 14, 2007		9. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEOS SIMONSON, STEVEN 17600 WEST VALLEY HIGHWAY TUKWILA, WA 98188 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	President, Chairman of the Board & Director Steve Simonson 17616 West Valley Highway Tukwila, WA 98188 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT SIMONSON, STEVEN 10620 NE 8TH STREET, STE. 102 BELLEVUE, WA 98004 <input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary & Treasurer Brenda Morris 17616 West Valley Highway Tukwila, WA 98188 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P PACE, JOHN 17600 WEST VALLEY HIGHWAY TUKWILA, WA 98188 <input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Bob Paquin 17616 West Valley Highway Tukwila, WA 98188 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SEIDEL, ROBERT 10620 NE 8TH STREET, STE. 102 BELLEVUE, WA 98004 <input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Debra Somberg 17616 West Valley Highway Tukwila, WA 98188 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MARKARIAN, OHAN 10620 NE 8TH STREET, STE. 102 BELLEVUE, WA 98004 <input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVP ALTENHOFEN, RICK 17600 WEST VALLEY HIGHWAY TUKWILA, WA 98188 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President Rick Altenhofen 17616 West Valley Highway Tukwila, WA 98188 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE:  Brenda Morris 9-5-07 206-493-2100 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					

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September 11, 2007

VIA FEDERAL EXPRESS (TRK 7925 5953 2108)

Division of Corporations
2670 Executive Center Circle
Suite 100
Tallahassee, FL 32301

Re: iFloor Corporation Annual Report

To Whom It May Concern:

Enclosed, please find the fully executed 2007 For Profit Corporation Annual Report form for iFloor Corporation, #F02000005366, and check # 76616, in the amount of \$550.00, to cover the filing fees.

Please send confirmation of this filing in the self addressed stamped envelope.

Additionally, please send any related official documents to my attention at the address listed below, it is the mailing address listed on the annual report.

Thank you in advance, and please feel free to contact me with any questions.

Very truly yours,

Deanna Seago
Paralegal

DS:
Enclosures

Law Offices

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