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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

## **DOCUMENT # H64567**

1. Corporation Name

ENDURAÇOLOR HARDWOOD FLOORING, INC.

## FILED Apr 06, 1999 8:00 am Secretary of State

04-06-1999 90005 048 \*\*\*158.75

| Principal Plac  | e of Business                                      | Mailing                 | Address             |                             |                          |                      |   |                     |                    |
|---|--|-------------------------|---------------------|-----------------------------|--------------------------|----------------------|---|---------------------|--------------------|
| 1942 TIGERTAIL BLVD.  1942 TIGERTAIL BLVD. DANIA FL 33004  1942 TIGERTAIL BLVD. DANIA FL 33004  |  |                         |                     |                             | DO NOT WOITE IN TH       | IC CDACE             |   |                     |                    |
|   |  |                         |                     |                             |                          |                      | DO NOT WRITE IN THE 3. Date Incorporated or Qualifed 07/01/1985 | IS SPACE            |                    |
| 2 Principal P   | lace of Business                                   | 2a. Mai                 | ling Address        | -<br>پ <del>نوند</del> ندست | <u></u>                  |                      |   | A                   | oplied For         |
| 21 26   |  |                         |                     |                             |                          | _                    | 59-2564352  | No                  | ot Applicable      |
| Suite, Apt.   | #, etc.  | Suit                    | Suite, Apt. #, etc. |                             |                          |                      | 5. Certificate of Status Desired                                | ,                   | Additional equired |
| City & State City & State   |  |                         | & State             |                             |                          |                      | 6. Election Campaign Financing                                  |                     | May Be             |
| 23 28   |  |                         |                     |                             |                          |                      | Trust Fund Contribution   |                     | to Fees            |
| Zip   |  |                         |                     | Cour                        | ıtry                     |                      | 8. This corporation owes the current year                       | ntangible<br>Yes    | No                 |
| 24  | 25   | 29                      | 4 4                 | 30                          |                          |                      | Personal Property Tax.  10. Name and Address of New Registere   |                     | 200                |
|   | 9. Name and Address of Curre                       | nt Registere            | a Agent             | -                           | 81                       | Name                 | Ig. Haine and Address of New Registers                          | <u> </u>            |                    |
| KNUPP, CHARLES R.   |  |                         |                     |                             |                          |                      |   |                     |                    |
| 1942 TIGERTAIL BLVD.  |  |                         |                     |                             | 82                       | Street Addr          | ress (P.O. Box Number is Not Acceptable)                        |                     |                    |
| DAN   | IA FL 33004  |                         |                     | ļ                           | 83                       |                      |   |                     | 4.411              |
|   |  |                         |                     |                             | 84                       | City                 | F   | ᆫᆝᆝ                 | 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. |  |                         |                     |                             |                          |                      |   |                     |                    |
| SIGNATORE   | Signature, typed or printed name of registered age | ent and title if applic | cable. (NOTE        | : Registered /              | Agent                    | t signature required | d when reinstating) DATE  |                     |                    |
| 12.   | OFFICERS A   | ND DIRECTO              |                     | 13.                         | _                        |                      | ADDITIONS/CHANGES TO OFFICERS                                   | AND DIRECTO  Change | ORS IN 12          |
| TITLE   | P CHARLES  |                         | ☐ DELETE            | 1.1 TITL                    |                          |                      |   | CT change           |                    |
| NAME  | KNUPP, CHARLES                                     |                         |                     |                             |                          |                      | ,<br>3  |                     |                    |
| STREET ADDRESS  | 1942 TIGERTAIL BLVD.                               |                         |                     |                             |                          | ADDRESS              |   |                     |                    |
| CITY-ST-ZIP   | DANIA FL<br>VS                                     | 1.40<br>DELETE 2.11     |                     |                             | <del></del> -            | - ZIP                |   | ☐ Change            | Addition           |
| TITLE   | KNUPP, CHARLES                                     | 2.1 N                   |                     |                             |                          |                      |   | <b>—</b> •          | _                  |
| NAME  |  |                         |                     | 1                           |                          | ADDRESS              |   |                     |                    |
| STREET ADDRESS  |  |                         |                     | 2.4 CIT                     | •                        |                      |   |                     | 1                  |
| CITY-ST-ZIP   | T  | DELETE 3.11             |                     |                             |                          | 1-21                 |   | Change              | Addition           |
| NAME  | KNUPP, CHARLES                                     | 3.2 N                   |                     |                             | ME                       |                      |   |                     |                    |
| STREET ADDRESS  | 1942 TIGERTAIL BLVD.                               | LVD. · 3.3 S            |                     |                             | REET                     | ADDRESS              | •   |                     |                    |
| CITY-ST-ZIP   | DANIA FL   | 34.0                    |                     |                             | Y-\$1                    | T-ZIP                |   |                     |                    |
| TITLE   |  | ·                       | ☐ DELETE            | 4.1 TITI                    | E                        |                      |   | ☐ Change            | ☐ Addition         |
| NAME  |  |                         |                     | 4. 2 NA                     | ME                       |                      |   |                     | ļ                  |
| STREET ADDRESS  | 1  |                         |                     | 4.3 STF                     | REET                     | ADDRESS              |   |                     |                    |
| CITY-ST-ZIP   |  |                         | <u> </u>            | 4.4 CIT                     | Y-ST                     | r-ZIP                |   |                     |                    |
| TITLE   |  | _                       | ☐ DELETE            | 5.1 TITS                    |                          |                      |   | ☐ Change            | ☐ Addition }       |
| NAME  |  |                         |                     | 5.2 NA                      |                          |                      |   |                     | 1                  |
| STREET ADDRESS  |  |                         |                     | 5.3 STF                     |                          | ADDRESS              |   |                     | }                  |
| CITY-ST-ZIP   |  |                         |                     |                             |                          |                      |   |                     | 1                  |
|   |  |                         |                     | 5.4 CIT                     | Y-ST                     | r-ZIP                |   | Chance              | Addition           |
| TITLE   |  |                         | ☐ DELETE            | 6.1 TIT                     | Y-ST<br>Æ                | r-ZIP                |   | Change              | ☐ Addition         |
| NAME  |  |                         | DELETE              | 6.1 TITI<br>6.2 NAJ         | Y-ST<br>LE<br>ME         |                      |   | ☐ Change            | ☐ Addition         |
|   | :  |                         | DELETE              | 6.1 TITI<br>6.2 NAJ         | y-st<br>Le<br>Me<br>Reet | ADDRESS              |   | Change              | ☐ Addition         |

14. I hereby 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 corporation or the receiver or yustee 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, withyall other like empowered.

SIGNATURE:

IGNATURE AND TYPES OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/31/99 954 9.22.966.

Date Dayline Phone #