

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # K63808

1. Entity Name
DELUXE FLOORING, INC.



Principal Place of Business
**3551 23RD AVENUE SOUTH NUMBER 7
LAKE WORTH, FL 33461 US**

Mailing Address
**17127 38TH LANE NORTH
LOXAHATCHEE, FL 33470 US**

FILED

**Mar 12, 2007 08:00 AM
Secretary of State**



01262007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0099096

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**COUSLEY, ANGELA MARIE
17127 38TH LANE NORTH
LOXAHATCHEE, FL 33470**

**DO NOT WRITE
IN THIS SPACE**

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

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

DATE

**FILE NOW!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PST
COUSLEY, ERIC RAYMOND
17127 38TH LANE NORTH
LOXAHATCHEE, FL**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**V
COUSLEY, PATRICK FRED
12912 BUCKLAND STREET
WEST PALM BEACH, FL**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

100000663150
03/21/07-80041-004 150.00

**DO NOT WRITE
IN THIS SPACE**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/8/07 5615821466

Date

Daytime Phone #