

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 06, 2001 8:00 am
Secretary of State

06-06-2001 90008 011 ***150.00

DOCUMENT # P00000038134

1. Entity Name

Floor Covering Installations, Inc.

Principal Place of Business

Mailing Address

7621 15th ST. E. Suite 1D
 Sarasota, FL 34243

2. Principal Place of Business

Same

3. Mailing Address

7621 15th ST. E

Suite, Apt. #, etc.

Suite 1D

City & State

City & State

Sarasota, FL

4. FEI Number

65-1020180

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

A0072741

6. Name and Address of Current Registered Agent

Steven M. Fricke
 3380 W. Price Blvd.
 North Port, FL 34287

7. Name and Address of New Registered Agent

Name

Same

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

7621 15th ST. E Suite 1D

City

Sarasota,

FL

Zip Code

34243

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.

SIGNATURE

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

Steven M. Fricke

President

5/14/01

(NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!

After MAY 1, 2001

Make Check Payable to Department of State

FEE IS \$150.00

Fee will be \$550.00

to Department of State

10. Election Campaign Financing

Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	President	<input type="checkbox"/> Delete
NAME	Steven M. Fricke	
STREET ADDRESS	2423 Amanda Dr.	
CITY-STATE-ZIP	Sarasota, FL 34232	
TITLE		<input type="checkbox"/> Delete
NAME		
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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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STREET ADDRESS		
CITY-STATE-ZIP		

CR2E034 (11/00)

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* Steven M. Fricke President 5/14/01 (941) 358-1951
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Attachment
D#P00000038134
A072741

FloorCovering Installations, Inc.
7621 15th Street East Suite 1D
Sarasota, Fl 34243
Tel: 941-358-1951 Fax: 941-360-1952
FloorCovInstall@aol.com

May 23, 2001

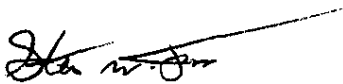
State of Florida
Division of Corporations

To Whom It May Concern,

Please accept the following check for my annual dues for Incorporation. I did not receive notice from the state to remit payment until the third week of May due to several factors. In April I was hospitalized after surgery and unable to work per Doctors orders for 4-6 weeks depending upon recovery. Upon returning to work, I inquired with my accountant as to why I had not received notice from the state for payment of annual dues to remain Incorporated. After researching, we found that since the corporation had moved, we never received notification at the above address. Upon receiving this information this week, I am remitting the \$150.00 fee.

Thanking you in advance for you understanding and cooperation in this matter. Should you have any questions, please do not hesitate to contact me at 941-358-1951.

Sincerely,



Steven M. Fricke
President