

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P00000116025

FILED
Jan 15, 2003
Secretary of State

Entity Name: HOME DESIGN AND FLOORING, INC.

Current Principal Place of Business:

1846 S TAMIAMI TR, UNIT 15
C/O ELZA OSIPOV
VENICE, FL 34293

New Principal Place of Business:

1734 S TAMIAMI TR.
C/O ELZA OSIPOV
VENICE, FL 34293

Current Mailing Address:

C/O ELZA OSIPOV
5143 POMPANO RD.
VENICE, FL 34293

New Mailing Address:

FEI Number: 65-1064135 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OSIPOV, ELZA
5143 POMPANO ROAD
VENICE, FL 34293 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: OSIPOV, ELZA
Address: 5143 POMPANO ROAD
City-St-Zip: VENICE, FL 34293

Title: TREJ () Delete
Name: OSIPOV, GENNADIY
Address: 5143 POMPANO RD
City-St-Zip: VENICE, FL 34293

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TREJ (X) Change () Addition
Name: OSIPOV, NATASHA
Address: 5143 POMPANO RD
City-St-Zip: VENICE, FL 34293

Title: VP () Change (X) Addition
Name: OSIPOV, SERGEY
Address: 3284 MT.HOPE ST.
City-St-Zip: NORTH PORT, FL 34293

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ELZA OSIPOV

D.

01/15/2003

Electronic Signature of Signing Officer or Director

_____ Date