## 2005, FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Jul 01, 2005 08:00 AM Secretary of State

ANNUAL REPORT				_	S	Secretary	of Sta
DOCUMENT # P01000077291						occi ctai y	oi Sta
Entity Name     FLOORING MASTERS, INC.							
Principal Plac	e of Business	Mailing Address		-			
4710 CAYO		4710 CAYO COSTA PL					
BRADENTON	I, FL 34203	BRADENTON, FL 34203		O FORMALOMORE OF	: W9188 23011 WWW WWW FSL	) 	FREEWOLDER STREET
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Г	O NOT WRITE	IN THIS SPA	ČF	06282005	No Chg-P	CR2E034 (10/03)	
-			or Praktori	4. FEI Number 59-375		<del></del>	pplied For lot Applicable
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	6. Name and Address of Current Ru						
LOPEZ, CLARIBEL				DO	NOT W	RITE	
4710 CAYO COSTA PL BRADENTON, FL 34203					THIS SF		
	,			11./6	i Hio or	ACE	
<b>a</b> 75.	named entity submits this statement for t	the arrange of the secretary	ad office or registe	ared egent or be	th in the State of Sic	ride. I em femillar with	end accent
the obligat	named entity submits this statement for the tions of registered agent.	tie brithdee or chatiditid as sedialer	ed nitice at tediare	aren afletit' ot bo	us, at the quale of the	11 <b>04.</b> ) (2) (1) (2) (1) (4)	, and accept
SIGNATURE.	Signature, typed or printed risms of registered agent and	d trie if applicable. (NOTE: Registers	d Agent eignature require	ed when rematating)		DATE	·····
			naina #1	\$5.00 May Be In accordance with s. 807.193(2)(b), F.S., the			FO 4-
FILE NOW!!! FEE IS \$150.00  Due by September 7, 2005  9. Election Campaign Finar Trust Fund Contribution.				5.00 May Be ided to Fees	corporation did	not receive the prior	notice.
III.	OFFICERS AND D	IRECTORS	t internal or in the teach	A CONTRACTOR	er i Francisco de la composição de la comp	12 12	Part Arts
NAME	LOPEZ, JUAN J				r a.194.294.39	. Note that they may be the Sec. of	
STREET ADDRESS CITY-51-ZIP	4710 CAYO COSTA PL BRADENTON, FL 34203				11000 07/01/1	100370062 15-80007-021	150.00
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CITY-ST-ZIP			]				
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NAME			1				

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), 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: \_

STREET ADORESS CITY-57-ZIP

SIGNATURE WED TYPED ON PRINTED NAME OF MONNIG OFFICER ON DIRECTOR

6-28-05

941-756-3999

Daytime Phone