2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000024826

Address:

City-St-Zip:

FILED Apr 22, 2004 Secretary of State

Entity Name: FLOORS OF KEY WEST, INC. **Current Principal Place of Business: New Principal Place of Business:** 5341 FIFTH AVENUE 5341 5TH AVENUE KEY WEST, FL 33040 KEY WEST, FL 33040 **Current Mailing Address: New Mailing Address:** 5341 FIFTH AVENUE 5341 5TH AVENUE KEY WEST, FL 33040 KEY WEST, FL 33040 FEI Number: 01-0622808 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of New Registered Agent: Name and Address of Current Registered Agent: RYSMAN, PETER RYSMAN, PETER 5341 FIFTH AVENUE 5341 5TH AVENUE KEY WEST, FL 33040 KEY WEST, FL 33040 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: 04/22/2004 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition RYSMAN, PETER Name: Name: 62 FRONT STREET Address: Address: City-St-Zip: KEY WEST, FL 33040 City-St-Zip: VΡ Title: Title: () Delete (X) Change () Addition RYSMAN, LINDA Name: RYSMAN, LINDA Name: 62 FRONT ST 102 FRONT ST Address: Address: KEY WEST, FL 33040 KEY WEST, FL 33040 City-St-Zip: City-St-Zip: Title: () Delete Title: (X) Change () Addition AVAREZ, RAY ALVAREZ, RAY Name: Name: 3248 PAULA AVE 3743 PAULA AVE Address: Address: City-St-Zip: KEY WEST, FL 33040 City-St-Zip: KEY WEST, FL 33040 Title: () Delete Title: VΡ () Change (X) Addition TRAMMEL, KURT Name: Name: Address: Address: 34 GOLF CLUB DR City-St-Zip: City-St-Zip: KEY WEST, FL 33040 Title: Title: () Change (X) Addition () Delete GRUSIN, MARY Name: Name:

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.

Address:

City-St-Zip:

2318 STAPLES AVE

KEY WEST, FL 33040

SIGNATURE: PETER RYSMAN D 04/22/2004