2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000024826

City-St-Zip: KEY WEST, FL 33040

Entity Name: FLOORS OF KEY WEST, INC

FILED Apr 03, 2006 Secretary of State

Entity Nar	me: FLOORS	OF KEY WEST, INC.				
Current Principal Place of Business:				New Principal Place of Business:		
5341 5TH AVENUE KEY WEST, FL 33040				5341 5TH AVE KEY WEST, FL 33040		
Current Mailing Address:				New Mailing Address:		
5341 5TH AVENUE KEY WEST, FL 33040				5341 5TH AVE KEY WEST, FL 33040		
FEI Number:	: 01-0622808	FEI Number Applied For ()	FEI Number No	Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
RYSMAN, PETER 5341 5TH AVENUE KEY WEST, FL 33040 US			5341 (RYSMAN, PETER 5341 5TH AVE KEY WEST, FL 33040 US		
The above in the State	named entity see of Florida.	submits this statement for the	purpose of chang	ing its registered off	ice or registered agent, or both,	
SIGNATURE:				04/03/2006		
Election Car		ic Signature of Registered Ag	ent		Date	
OFFICERS AND DIRECTORS:			ADDI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	D () RYSMAN, PETE 62 FRONT STR KEY WEST, FL	EET	Title: Name: Addres: City-St-): :	Change ()Addition	
Title: Name: Address: City-St-Zip:	VP () RYSMAN, LIND 62 FRONT ST KEY WEST, FL		Title: Name: Addres: City-St-	RYSMAN, PETER 62 FRONT ST		
Title: Name: Address: City-St-Zip:	T () ALVAREZ, RAY 3743 PAULA AV KEY WEST, FL	/E	Title: Name: Addres: City-St-	RYSMAN, PETÉF 62 FRONT ST		
Title: Name: Address:	VP () TRAMMEL, KUI 34 GOLF CLUB		Title: Name: Addres:	RYSMAN, LINDA	Change ()Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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.

City-St-Zip: KEY WEST, FL 33040

SIGNATURE: PETER RYSMAN D 04/03/2006