

FILED
Sep 08, 2003 8:00 am
Secretary of State

05-02-2003 90743 046 ***150.00

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2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P02000065480

1. Entity Name
ADVANCED FLOORING SYSTEMS, INC.

Principal Place of Business
P O BOX 451478
SUNRISE, FL 33345

Mailing Address
P O BOX 451478
SUNRISE, FL 33345

2. Principal Place of Business
411 NW 134 Ave
Sunrise, Fla. 33345

3. Mailing Address
Sunrise, Fla. 33345

City & State
Plantation, FL
33325

City & State

4. FEI Number
54-2068953

Applied For
No Applicable

5. Certificate of Status Desired
1 Fee Required

6. Name and Address of Current Registered Agent

WALTON, SEAN E
411 NW 534 AVE
PLANTATION, FL 33325

7. Name and Address of New Registered Agent

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

411 NW 134 Ave
City
Plantation FL 33325

8. The above named agent certifies the statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE
[Signature]

9. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 190.01(2)(b), 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 as changed, or on an attachment with an address, with all other like empowered.

10. Election Campaign Financing
Trust Fund Contributions. ☐ \$5,000 May Be Added to Pool

10. OFFICERS AND DIRECTORS

10A NAME STREET ADDRESS CITY-ST-ZIP	WALTON, SEAN E P O BOX 451478 SUNRISE, FL 33345	☐ Date
10B NAME STREET ADDRESS CITY-ST-ZIP	MC MULLEN, MELISSA J P O BOX 451478 SUNRISE, FL 33345	☒ Date
10C NAME STREET ADDRESS CITY-ST-ZIP		☐ Date
10D NAME STREET ADDRESS CITY-ST-ZIP		☐ Date
10E NAME STREET ADDRESS CITY-ST-ZIP		☐ Date
10F NAME STREET ADDRESS CITY-ST-ZIP		☐ Date

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

11A NAME STREET ADDRESS CITY-ST-ZIP	SECRETARY Melissa McMullen P.O. Box 451478 Sunrise, FL 33345	☐ Change ☒ Addition
11B NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
11C NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
11D NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
11E NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
11F NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 190.01(2)(b), 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 as changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Sean Walton / Sean Walton

4/21/03 954-709-9460