
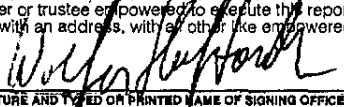


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 11, 2005 08:00 AM
Secretary of State

DOCUMENT # P02000070594 1. Entity Name WOLF'S FLOORING, INC.		
Principal Place of Business 479 ST ANDREWS BLVD NAPLES, FL 34113	Mailing Address 479 ST ANDREWS BLVD NAPLES, FL 34113	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent PATTERSON, ROBERT C 479 ST ANDREWS BLVD NAPLES, FL 34113		DO NOT WRITE IN THIS SPACE
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>		
FILE NOW!!! FEE IS \$550.00 Due by September 7, 2005		9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P HOFSTADLER, WOLFGANG 479 ST ANDREWS BLVD NAPLES, FL 34113	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
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TITLE NAME STREET ADDRESS CITY - ST - ZIP		
12. I hereby certify that the information supplied with this filing does not qualify 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 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 or without the endorsement.		
SIGNATURE:  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		5. July 2005 <small>Date Daytime Phone #</small>



07052005 No Chg-P CR2E034 (10/03)

4. FEI Number 81-0558754	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

U00000372174
07/11/05-80020-017 550.00

**DO NOT WRITE
IN THIS SPACE**

CASHERS CHECK
4260588