


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 27, 2007 08:00 AM
Secretary of State

DOCUMENT # P02000088577

1. Entity Name
FLOOR SHOW OF BOYNTON BEACH, INC.



Principal Place of Business
9819 G MILITARY TRAIL
BOYNTON BEACH, FL 33437

Mailing Address
9819 G MILITARY TRAIL
BOYNTON BEACH, FL 33437

DO NOT WRITE IN THIS SPACE



07172007 No Chg-P CR2E034 (11/05)

4. FEI Number 37-1488121	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MILLER, STUART F
9819 G MILITARY TRAIL
BOYNTON BEACH, FL 33437

**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 _____ (NOTE: Registered Agent signature required when reappointing)

UD00000770705
07/27/07-80008-012 150.00

FILE NOW!!! FEE IS \$150.00 Due by September 14, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPS MILLER, STUART F 9819 G MILITARY TRAIL BOYNTON BEACH, FL 33437
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: *[Signature]* X *[Signature]* X 7/24/07 X 761 737 0004

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #