2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

AMBITUED AITHORE IXET OILT					
DOCUMENT # P0300001730  1. Entity Name BAYVIEW FLOORING & INTERIORS, INC.  Principal Place of Business Mailing Address				2007 FEB -2 PM 1: 21 SECRETARISEE FLORIDA TALLAHASSEE FLORIDA	
				SCURE SEFE FLORIDA	
Principal Place	e of Business	Mailing Address		TALLANASSEE	
7510 NAVAR		7510 NAVARRE PARKY	IAY		
NAVARRE, FL	. 32566	NAVARRE, FL 32566			
				L NEGLETAL EN BEITE KILL SERIK OSIN OSIN SOKU DEKEL KIRU KESEL KILL ERENEL KILL FREI	
2. Principal Pl	ace of Business - No P.O. Box #	3. Mailing Address			
Crite Act # cre				( Innertage it opice (th) 2011 6219 8241 2241 2241 1241 1242 1441 1241 1441	
Suite, Apt. #, etc. Suite		Suite, Apt. #, etc.		01262007 Chg-P CR2E034 (12/06)	
City & State		City & State		4. FEI Number Applied For	
				75-3091610 Not Applicab	
Zip	Country	Zip	Country	5. Certificate of Status Desired \$8.75 Additional	
	6. Name and Address of Curren	t Registered Agent	<u> </u>	Fee Required 7. Name and Address of New Registered Agent	
Name					
BLACK, EL			<u> </u>	Deborah Black	
7510 NAVARRE PARKWAY NAVARRE, FL 32566			Street A	Address (P.O. Box Number is Not Acceptable)	
147711112	, 02000		1	1510 Navarre Parkway	
			City	Navacce FL 393100	
8. The above	named entity submits this statement t	or the purpose of changing its	registered office o	or registered agent, or both, in the State of Florida. I am familiar with, and accept	
the obligati	ons of registered agent.	30	rogioto on on o	J. J	
SIGNATURE_	thebout	Dack		1/29/07	
	Signature, typed or printed name of registered ager	t and title if applicable. (NOTI	E: Registered Agent signat	ature required when reinstating) DATE	
		9. Election Campai	an Engagine	£5.00	
Ame	ended AR is \$61.25	Trust Fund Cont	• • —	\$5.00 May Be   Added to Fees	
10.	OFFICERO AND	DUDENTODO			
TITLE	OFFICERS AND	Delete	11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11    P/VP / T	
NAME	BLACK, EUBY	Delitic	NAME	DEBORAH BLACK TSIO NAVARRE PARKUAY	
STREET ADDRESS	7510 NAVARRE PARKWAY		STREET ADDRESS	TSIO NAVARRE HARKWAY	
CITY-ST-ZIP	NAVARRE, FL 32566	<del></del>	CITY-ST-ZIP	NAVARRE, FL. 32566	
TITLE	VP	Delete	TITLE	☐ Change ☐ Addition	
NAME STREET ADDRESS	BLACK, DAVID 7510 NAVARRE PARKWY	•	NAME STREET ADDRESS		
CITY-SI-ZIP	NAVARRE, FL 32566		CITY-ST-ZIP		
TITLE	Т	☐ Delete	TITLE	S Addition	
NAME	BLACK, KIM		NAME	KIM BLACK	
STREET ADDRESS CITY-ST-ZIP	7510 NAVARREE PKWY NAVARRE, FL 32566		STREET ADDRESS CITY-ST-ZIP	KIM BLACK 7510 NAVARLE PARKWAY NAVARLE, FL 32566	
ITILE	S	Delete	TITLE		
NAME	BLACK, EUBY J	Delete	NAME	☐ Change ☐ Additio	
STREET ADDRESS	7510 NAVARRE PKWY.		STREET ADDRESS		
CITY-ST-ZIP					
	NAVARRE, FL 32566	<b></b>	CITY-ST-ZIP		
TITLE	NAVARRE, FL 32566	☐ Delete	TITLE	Change Addition	
	NAVARRE, FL 32566	☐ Delete	TITLE NAME	400088288464	
TITLE NAME	NAVARRE, FL 32566	☐ Delete	TITLE	400088288464 02/14/0701011019 **61.25	
TITLE NAME STREET ADDRESS	NAVARRE, FL 32566	☐ Delete ☐ Delete	TITLE NAME STREET ADDRESS	400088288464	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	NAVARRE, FL 32566		TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	400088288464 02/14/0701011019 **61.25	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	NAVARRE, FL 32566		TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	400088288464 02/14/0701011019 **61.25	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	02/14/0701011019 **61.25  B 2/5/01	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP  12. I hereby c indicated	ertify that the information supplied wir on this report or supplemental report	☐ Delete  The thire filling does not qualify for its true and accurate and that not the true and true and the true and true a	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP The exemptions of the exemption	02/14/0701011019 **61.25  Change Addition Change Addition Change Addition Change Addition Change Addition Change Contained in Chapter 119, Florida Statutes. I further certify that the information have the same legal effect as if made under path; that I am an officer or director.	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby c indicated of the corp	ertify that the information supplied wir on this report or supplemental report	Delete  The this filling does not qualify for is true and accurate and that nowered to execute this report.	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP T the exemptions or y signature shall h	02/14/0701011019 **61.25  B 2/5/01 Change Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby c indicated of the corp	ertify that the information supplied wit on this report or supplemental report poration or the receiver or trustee em or on an attachment with an address.	Delete  The this filling does not qualify for is true and accurate and that nowered to execute this report.	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP T the exemptions or y signature shall h	02/14/0701011019 **61.25  Change Addition Change Addition Change Addition Change Addition Change Addition Change Contained in Chapter 119, Florida Statutes. I further certify that the information have the same legal effect as if made under path; that I am an officer or director.	