2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000018991

Entity Name: ZORKO FLOOR SPECIALIST FLORIDA, INC.

FILED Jan 23, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2717 SEVILLE BLVD 2545 NE COACHMAN ROAD

4207 #212

CLEARWATER, FL 33764 US CLEARWATER, FL 33765

Current Mailing Address: New Mailing Address:

2717 SEVILLE BLVD 2545 NE COACHMAN ROAD # 4207 #212

CLEARWATER, FL 33764 US CLEARWATER, FL 33765 US

FEI Number: 04-3740309 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ELIAS, KAROLY ELIAS, KAROLY 2717 ŚEVILLE BLVD

2545 NE COACHMAN ROAD # 4207 CLEARWATER, FL 33764 US CLEARWATER, FL 33765 US

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.

SIGNATURE: KAROLY ELIAS 01/23/2004

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRFS () Delete Title: PRFS (X) Change () Addition

ANDRASI, GABOR Name: Name: KAROLY, ELIAS 239 TIMBER CREEK LANE 2545 NE COACHMAN ROAD #212 Address: Address: City-St-Zip: MARIETTA, GA 30060 US City-St-Zip: CLEARWATER, FL 33765 US

Title: (X) Change () Addition Title: TREA () Delete TREA

Name: ANDRASI, GABOR Name: KAROLY, ELIAS 239 TIMBER CREEK LANE 2545 NE COACHMAN ROAD #212 Address: Address: MARIETTA, GA 30060 US CLEARWATERER, FL 33765 US City-St-Zip: City-St-Zip:

Title: Title: SEC () Delete SEC (X) Change () Addition

ELIAS, KAROLY ELIAS, KAROLY Name: Name:

2717 SEVILLE BLVD # 4207 2545 NE COACHMSN ROAD Address: Address: City-St-Zip: CLEARWATER, FL 33764 US City-St-Zip: CLEARWATER, FL 33765 US

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

SIGNATURE: KAROLY ELIAS **PRES** 01/23/2004