## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000051456

Entity Name: VERSATILE FLOORING INC.

FILED May 01, 2004 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 8590 NW 8 LN #10 480 NW 85TH PL MIAMI, FL 33126 MIAMI, FL 33126 US **Current Mailing Address: New Mailing Address:** 8590 NW 8 LN #10 PO BOX 228384 MIAMI, FL 33126 MIAMI, FL 33122 US FEI Number: 65-1189937 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: LORETTE, KRISTIE LORETTE, PHILLIP T 8590 NW 8 LN #10 480 NW 85TH PL MIAMI, FL 33126 MIAMI, FL 33126 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: PHILLIP T LORETTE 05/01/2004 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ).

Title:

( ) Delete

## **OFFICERS AND DIRECTORS:**

Title:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition

LORETTE, KRISTIE LORETTE, KRISTIE Name: Name: 480 NW 85TH PL #1 8590 NW 8 LN #10 Address: Address: City-St-Zip: MIAMI, FL 33126 City-St-Zip: MIAMI, FL 33126 ( ) Delete Title: Title: ( ) Change (X) Addition Name: Name: LORETTE, PHILLIP T Address: 480 NW 85TH PL #1 Address: MIAMI, FL 33126 US City-St-Zip: City-St-Zip: Title: Title: () Delete ( ) Change (X) Addition Name: LORETTE, MAXINNE A Name: 480 NW 85TH PL #1 Address Address: City-St-Zip: City-St-Zip: MIAMI, FL 33126 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: KRISTIE LORETTE D 05/01/2004