


FILED
Sep 06, 2005 8:00 am
Secretary of State

[illegible]

DOCUMENT # P03000113899				09-06-2005 90137 019 ***150.00	
1. Entity Name POPOV FLOORING INC					
Principal Place of Business 8816 CULEBRA AVENUE NORTH PORT, FL 34287 US		Mailing Address 8816 CULEBRA AVENUE NORTH PORT, FL 34287 US			
2. Principal Place of Business <i>11848 De Miranda Ave</i>		3. Mailing Address <i>11848 De Miranda Ave</i>			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		05272005 Chg-P CR2E034 (10/03)	
City & State <i>Warm Mineral Springs FL US</i>		City & State <i>Warm Mineral Springs FL US</i>		4. FEI Number <i>20-0311538</i>	
Zip <i>34287</i>		Zip <i>FL 34287</i>		Applied For Not Applicable	
Country <i>US</i>		Country <i>US</i>		5. Certificate of Status Desired <i>60.75</i> Additional Fee Required	
6. Name and Address of Current Registered Agent POPOV, ALEXANDER 8816 CULEBRA AVENUE NORTH PORT, FL 34287				7. Name and Address of New Registered Agent	
				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				City	
				FL Zip Code	
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 <i>Alexander Popov</i> 06.19.05 <small>Signature typed or printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005		9. Election Campaign Financing Trust Fund Contribution.		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE NAME STREET ADDRESS CITY - ST - ZIP		TITLE NAME STREET ADDRESS CITY - ST - ZIP			
D,P POPOV, ALEXANDER 8816 CULEBRA AVENUE NORTH PORT, FL 34287		[] Change [] Addition			
[] Delete					
V POPOV, EUGENE A 8816 CULEBRA AVENUE NORTH PORT, FL 34287		[] Change [] Addition			
[] Delete					
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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 all other like empowered.					
SIGNATURE: <i>Alexander Popov</i> ALEXANDER POPOV (941) 661-3892 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					