

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000143906

FILED  
Apr 13, 2004  
Secretary of State

Entity Name: MASTER FLOOR ENTERPRISE, INC.

## Current Principal Place of Business:

647 HOLBROOK AVE  
DELTONA, FL 32738

## New Principal Place of Business:

2061 DALTON AVE  
DELTONA, FL 32725

## Current Mailing Address:

647 HOLBROOK AVE  
DELTONA, FL 32738

## New Mailing Address:

2061 DALTON AVE  
DELTONA, FL 32725

FEI Number: 86-1089492

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SUAREZ, MARLENE  
647 HOLBROOK AVE  
DELTONA, FL 32738

## Name and Address of New Registered Agent:

SUAREZ, MARLENE  
2061 DALTON AVE  
DELTONA, FL 32725

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:

04/13/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution (X).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: SUAREZ, MARLENE  
Address: 647 HOLBROOK AVE  
City-St-Zip: DELTONA, FL 32738

Title: VD ( ) Delete  
Name: CRUZ, ALBERTO  
Address: 647 HOLBROOK AVE  
City-St-Zip: DELTONA, FL 32738

Title: SD (X) Delete  
Name: CRUZ, AMPARO  
Address: 647 HOLBROOK AVE  
City-St-Zip: DELTONA, FL 32738

Title: VD (X) Delete  
Name: SENTMANAT, CARLOS  
Address: 647 HOLBROOK AVE  
City-St-Zip: DELTONA, FL 32738

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: SUAREZ, MARLENE  
Address: 2061 DALTON AVE  
City-St-Zip: DELTONA, FL 32725

Title: VD (X) Change ( ) Addition  
Name: CRUZ, ALBERTO  
Address: 2061 DALTON AVE  
City-St-Zip: DELTONA, FL 32725

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: MARLENE SUAREZ

PD

04/13/2004

Electronic Signature of Signing Officer or Director

Date