2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 04, 2005
Secretary of State

DOCUMENT# P03000155726

Entity Name: BRYAN IOBST FLOOR COVERING INCORPORATED

Current Principal Place of Business:

2242 COBBLEFIELD CIRCLE
APOPKA, FL 32703 US

New Principal Place of Business:

3027 WINDCHIME CR W
APOPKA, FL 32703 US

Current Mailing Address:

2242 COBBLEFIELD CIRCLE
APOPKA, FL 32703 US

New Mailing Address:

3027 WINDCHIME CR W
APOPKA, FL 32703 US

FEI Number: 20-0516095 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

IOBST, PENNY
2242 COBBLEFIELD CIRCLE
APOPKA, FL 32703 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: IOBST, BRYAN
Address: 2242 COBBLEFIELD CIRCLE
City-St-Zip: APOPKA, FL 32703 US

Title: V ( ) Delete
Name: IOBST, PENNY
Address: 2242 COBBLEFIELD CIRCLE
City-St-Zip: APOPKA, FL 32703 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT (X) Change ( ) Addition
Name: IOBST, BRYAN
Address: 3027 WINDCHIME CR W
City-St-Zip: APOPKA, FL 32703 US

Title: VPS (X) Change ( ) Addition
Name: IOBST, PENNY
Address: 3027 WINDCHIME CR W
City-St-Zip: APOPKA, FL 32703 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: BRYAN IOBST DPT 08/04/2005

Electronic Signature of Signing Officer or Director Date