

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 05, 2007 8:00 am
Secretary of State

02-05-2007 90117 032 ***150.00

DOCUMENT # P03000156624

1. Entity Name
SLAVKO'S FLOORING INSTALLATION, INC.



Principal Place of Business
**88-11 NW 10TH STREET
PEMBROKE PINES, FL 33024**

Mailing Address
**88-11 NW 10TH STREET
PEMBROKE PINES, FL 33024**

60012493



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01252007 Chg-P CR2E034 (12/06)

City & State

City & State

4. FEI Number

20-0551848

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MLADENOVICH, SLAVKO
88-11 NW 10TH STREET
PEMBROKE PINES, FL 33024**

Name **SLAVKO MLADENOVICH**

Street Address (P.O. Box Number is Not Acceptable)

88-11 NW. 10 ST.

City

PEMBROKE PINES, FL

Zip Code

33024

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 **Slavko Mladenovich**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

01/31/07

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☐ Delete
NAME **MLADENOVICH, SLAVKO**
STREET ADDRESS **88-11 NW 10TH STREET**
CITY-ST-ZIP **PEMBROKE PINES, FL 33024**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Delete
NAME
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: **Slavko Mladenovich**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/31/07

Date

Daytime Phone #



ATTACHMENT

60012493

Division of Corporations

Annual Report

Annual Report Help

Document Number

P03000156624

Business Entity Name

SLAVKO'S FLOORING INSTALLATION, INC.

FEI Number 200551848

FEI Number Status	Listed Above	Applied For	Not Applicable
Certificate of Status Desired	Yes	No	\$8.75 each
Election Campaign Financing Trust Fund Contribution	Yes	No	

Principal Place of Business

Address 88-11 NW 10TH STREET
Suite, Apt. #, etc.
City, State PEMBROKE PINES, FL
Zip Code & Country 33024

Mailing Address

Address 88-11 NW 10TH STREET
Suite, Apt. #, etc.
City, State PEMBROKE PINES, FL
Zip Code & Country 33024

Name and Address of Registered Agent

Name (Last, First, Middle, Title) MLADENOVICH, SLAVKO

- OR -

Business to serve as RA

Address (PO Box is not acceptable) 88-11 NW 10TH STREET

Suite, Apt. #, etc.,

City, State PEMBROKE PINES, FL

Zip Code & Country 33024 US

If there is a change in registered agent, the new agent will need to type their name in the 'Registered Agent Signature' block below to accept the designation of registered agent. RA signature must be an individual name. If the RA is a business

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entity, an individual must sign on their behalf. A business entity cannot serve as its own RA.

Registered Agent Signature *Slavko Mladenovich*

This signature must be that of the individual "signing" this document electronically or be made with the full knowledge and permission of the individual, otherwise it constitutes forgery under s.831.06, Florida Statutes.

Officer/Director Name and Address

Our database can hold up to 6 officers/directors. If more than 6 officers/directors need to be made a part of the record, you cannot file the annual report online. You will need to download an annual report and list the additional officers/directors, title(s), name, and address on an attachment.

Title **P**
Name (Last, First, Middle, Title) **MLADENOVICH , SLAVKO , ,**

- OR -

Entity Name to serve as
Officer/Director

Street Address **88-11 NW 10TH STREET**
City, State **PEMBROKE PINES , FL**
Zip Code & Country **33024**

Title
Name (Last, First, Middle, Title) , , ,

- OR -

Entity Name to serve as
Officer/Director

Street Address
City, State
Zip Code & Country

Title
Name (Last, First, Middle, Title) , , ,

- OR -

Entity Name to serve as
Officer/Director

Street Address
City, State
Zip Code & Country

Title

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Name (Last, First, Middle, Title)

- OR -

Entity Name to serve as
Officer/Director

Street Address

City, State

Zip Code & Country

Title

Name (Last, First, Middle, Title)

- OR -

Entity Name to serve as
Officer/Director

Street Address

City, State

Zip Code & Country

Title

Name (Last, First, Middle, Title)

- OR -

Entity Name to serve as
Officer/Director

Street Address

City, State

Zip Code & Country

An individual named above or an individual signing on behalf of an entity named above must type their name in the 'Officer/Director Signature' block below. A corporate name is not allowed in this block.

Title

Officer/Director Signature

P
Slavko Gladunovic

This signature must be that of the individual "signing" this document electronically or be made with the full knowledge and permission of the individual; otherwise it constitutes forgery under s.831.06, Florida Statutes. The individual "signing" this document affirms that the facts stated herein are true.

Continue Reset