2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000157582

MIAMI, FL 33130 US

City-St-Zip:

-tit - Nome - TOTAL FLOODING OF SELO

FILED May 01, 2004 Secretary of State

Entity Name: TOTAL FLOORING OF S FLORIDA INC					
Current Principal Place of Business:			New Principal Place o	f Business:	
8968 SW 1 MIAMI, FL	57TH STREE 33157 US	Т			
Current Mailing Address:			New Mailing Address:	New Mailing Address:	
8968 SW 1 MIAMI, FL	57TH STREE 33157 US	Т			
FEI Number:	88-0516021	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and Address of	Name and Address of New Registered Agent:	
DELLAVECCHIA, THOMAS 8968 SW 157TH STREET MIAMI, FL 33157 US					
	named entity s of Florida.	submits this statement for the pu	urpose of changing its registered	office or registered agent, or both,	
SIGNATUR	RE:				
	Electron	ic Signature of Registered Ager	nt	Date	
		3(2)(b), F.S., the corporation did not g Trust Fund Contribution ().	receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () DELLAVECCHI 8968 SW 157TI MIAMI, FL 331	H STREET	Title: (Name: Address: City-St-Zip:) Change ()Addition	
Title: Name:	MGR () ALTIMIRANO, L		Title: (Name: Address:) Change ()Addition	

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: THOMAS DELLAVECCHIA P 05/01/2004