

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 07, 2005 8:00 am
Secretary of State

02-01-2005 90025 025 ***150.00

DOCUMENT # P04000047501 1. Entity Name LAKEWOOD FLOORS AND MORE, INC.					
Principal Place of Business 1518 53RD AVE EAST BRADENTON, FL 34203			Mailing Address 14210 NIGHTHAWK TER BRADENTON, FL 34202		
2. Principal Place of Business		3. Mailing Address 1518 53rd Ave E			
Suite, Apt. #, etc.		Suite, Apt. #, etc. Bradenton			
City & State		City & State Florida			
Zip	Country	Zip	Country	4. FEI Number 90-0149819	
34203		USA		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent FELICO, MARITZA 14210 NIGHTHAWK TERRACE BRADENTON, FL 34202				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 _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 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 NAME STREET ADDRESS CITY-ST-ZIP	P MARRERO, RODOLFO E 12006 WINDING WOODS WAY BRADENTON, FL 34202 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FELICO, MARITZA F 14210 NIGHTHAWK TERRACE BRADENTON, FL 34202 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
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: <u><i>Maritza Felico</i></u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			<u>1/18/05</u> <u>941-739-5518</u> Date Daytime Phone		

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01182005 Chg-P CR2E034 (10/03)

Applied For
Not Applicable

FL Zip Code