2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 13, 2007 8:00 am
Secretary of State
04-30-2007 90837 015 ***150.00

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DOCUMENT # P06000085454 1. Eratty Name RSL FLOORING, INC.						04-30-2	007 90837 013	130.00
Principal Place of Business 524 S. BANANA RIVER DRIVE MERRITT ISLAND, FL 32952		Mailing Address 524 S. BANANA RIVER DRIVE MERRITT ISLAND, FL 32952		66018980				
2. Principal Place of Business - No P.O. Box #		2. Mailing Address POBOX 40						
Suite, Apt. #, etc.		Suite, Apt. #, etc.		04182007	Chg-P	CR2E034 (12/06)		
Uspersons to		molbourno FL		FL	4. FEI Numb	07740	· · · · · · · · · · · · · · · · · · ·	oplied For ot Applicable
32901	Country 13	32902	Country	<u> </u>		of Status Desired	S8.75 Ad	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent Name				
KAPLAN, STEVEN R 5 24 S. BANANA RIVER DRIVE MERRITT ISLAND, FC 32952			- -	Street Address (P.O. Box Number is Not Acceptable)				
			-	City Mel	persx	••	FL Zig Cg	201
8. The above named entity submite 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, typied or printed name of registered agent and side if applicable. (NOTE: Registered Agent signature required when reinstatory) DATE								
FILE NOWIII FEE IS \$150,00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees								
10	OFFICERS AND	DIRECTORS	11.		ADDITIONS	CHANGES TO OF	FICERS AND DIRECTOR	IS IN 11
TITLE P NAME O'BERRY, F	La Cereir		TITLE				Change	Addition
SIRET ADDRESS 13825 CARTERS GROVE LANE CITY-SI-ZP JACKSONVILLE, FL 32223			ADDRESS					
ITILE VP						. 	☐ Change	Addition
•	·		NAME	ADDRESS				
			CITY-SI				_	
TITLE S/T	S/T Delete TITLE WILLIAMSON, LOUIS M					····	☐ Change	☐ Addition
STREET ADDRESS 110 ISLAND GROVE DRIVE STR			STREET	ADDRESS				
Citi-si-zir MERRITT IS	SLAND, FL 32952		CITY-S	I-AP			☐ Change	Addition
NAME			NAME					
STREET ADDRESS CITY-ST-ZIP			CITY-S	ADORESS ST-ZIP				
TITLE								
NAME		☐ Delete	TITLE				☐ Change	☐ Addition
NAME STREET ADDRESS CITY-ST-ZIP		Oelete	NAME	ADORESS IT-ZIP			☐ Change	☐ Addition
STREET ADDRESS CITY-ST-ZIP TITLE		☐ Celete	NAME STREET CITY-S				☐ Change	Addition
STREET ADDRESS CITY-ST-ZIP			NAME STREET CITY-SI TITLE NAME	T-ZIP ADDRESS			· · · · · · · · · · · · · · · · · · ·	
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. 1 hereby cartify that the it indicated on this report of the comporation or the	or supplemental report is receiver or trustee empo		NAME STREET CITY-S TITLE NAME STREET CITY-S T the exert ty signatur as require	ADDRESS IT-ZIP notions contained re shall have the	same legal effer	ct as if made under	Change I further certify that the i oath; that I am an officer	Addition