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Jan 24 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P29951** (1)

1. Corporation Name
COUNTRY FLOORS, INC.

Principal Place of Business
**15 EAST 16TH STREET
NEW YORK NY 10003**

Mailing Address
**15 EAST 16TH STREET
NEW YORK NY 10003-3104**



3. Date Incorporated or Qualified
06/26/1990

3a. Date of Last Report
03/26/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

4. FEI Number

13-2536574

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

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

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐

Yes

☐

No

9. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	CD	DELETE
NAME	KARLSON, NORMAN	
STREET ADDRESS	8735 MELROSE AVE	
CITY - ST - ZIP	LOS ANGELES CA	
TITLE	PD	DELETE
NAME	KARLSON, SHANNON	
STREET ADDRESS	8735 MELROSE AVE	
CITY - ST - ZIP	LOS ANGELES CA	
TITLE	VP	DELETE
NAME	HATTON, BARBARA	
STREET ADDRESS	15 EAST 16TH ST	
CITY - ST - ZIP	NEW YORK NY	
TITLE	VP	DELETE
NAME	KARLSON, DOUGLAS	
STREET ADDRESS	8735 MELROSE AVE	
CITY - ST - ZIP	LOS ANGELES CA	
TITLE	VP	DELETE
NAME	GRANDE, HERMO	
STREET ADDRESS	8735 MELROSE AVE	
CITY - ST - ZIP	LOS ANGELES CA	
TITLE	CC	DELETE
NAME	CHOWDHURY, MARK	
STREET ADDRESS	15 EAST 16TH ST	
CITY - ST - ZIP	NEW YORK NY	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	CHIEF OPERATING OFFICER	Change	Addition
1.2 NAME	FRANK P SWIGUT		
1.3 STREET ADDRESS	15 EAST 16TH ST		
1.4 CITY - ST - ZIP	NYC, NY 10003		
2.1 TITLE		Change	Addition
2.2 NAME			
2.3 STREET ADDRESS			
2.4 CITY - ST - ZIP			
3.1 TITLE		Change	Addition
3.2 NAME			
3.3 STREET ADDRESS			
3.4 CITY - ST - ZIP			
4.1 TITLE		Change	Addition
4.2 NAME			
4.3 STREET ADDRESS			
4.4 CITY - ST - ZIP			
5.1 TITLE		Change	Addition
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY - ST - ZIP			
6.1 TITLE		Change	Addition
6.2 NAME			
6.3 STREET ADDRESS			
6.4 CITY - ST - ZIP			

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Mark Chowdhury
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

1/7/97

Daytime Phone #

CR2E034 (9/96)