

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 05, 2001 8:00 am
Secretary of State

05-23-2001 91181 040 ***150.00

DOCUMENT # **P 29951**
 1. Entity Name
Country Floors, Inc.

Principal Place of Business Mailing Address
15 East 16th St 15 East 16th St.
New York, NY 10003 New York, NY 10003

2. Principal Place of Business 3. Mailing Address
 Suite, Apt. #, etc. Suite, Apt. #, etc.
 City & State City & State
 Zip Country Zip Country

50218

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent
CT Corporation System
1200 S. Pine Island Road
Plantation, FL 33324

4. FEI Number **13-2536574** Applied For
 Not Applicable
 5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required
 7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

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.

SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐ **FILE NOW!!!** **After MAY 1, 2001** **Fee will be \$550.00** **Make Check Payable to Department of State**
 10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS
 TITLE ☐ Delete
 NAME **PD**
 STREET ADDRESS **Karlso, Shannon**
 CITY-ST-ZIP **8735 Melrose Ave. Los Angeles, CA**
 TITLE ☐ Delete
 NAME **VP**
 STREET ADDRESS **Hutton, Barbara**
 CITY-ST-ZIP **15 East 16th St. New York, NY**
 TITLE ☐ Delete
 NAME **VP**
 STREET ADDRESS **Grande, Hermon**
 CITY-ST-ZIP **8735 Melrose Ave. Los Angeles, CA**
 TITLE ☐ Delete
 NAME **CC**
 STREET ADDRESS **Chowdhury, Mark**
 CITY-ST-ZIP **15 East 16th St. New York, NY**
 TITLE ☐ Delete
 NAME **Karlson, Norman**
 STREET ADDRESS **8735 Melrose Ave. Los Angeles, CA**
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
 TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 TITLE ☐ Change ☐ Addition
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 CITY-ST-ZIP
 TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

3. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Mark Chowdhury** **6/25/01 212-627-8300**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (11/00)