

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P29951

FILED
Apr 29, 2004
Secretary of State

Entity Name: COUNTRY FLOORS, INC.

Current Principal Place of Business:

5670 WILSHIRE BLVD SUITE 750
LOS ANGELES, CA 90036

New Principal Place of Business:

Current Mailing Address:

5670 WILSHIRE BLVD SUITE 750
LOS ANGELES, CA 90036

New Mailing Address:

FEI Number: 13-2536574

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

LEIN-NEEDELMAN, LESLIE
D.C.O.T.A. 1855 GRIFFIN ROAD
STE B-458
PLANTATION, FL 33324 US

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: LESLIE LEIN-NEEDELMAN

04/29/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CEOP () Delete
Name: KARLSON, SHANNON,
Address: 5670 WILSHORE BLVD
City-St-Zip: LOCKPORT, KY 40036

Title: VP () Delete
Name: HATTON, BARBARA
Address: 15 EAST 16TH ST
City-St-Zip: NEW YORK, NY

Title: VP () Delete
Name: GRANDE, HERMO
Address: 5670 WILSHIRE BL., SUITE 750
City-St-Zip: LOS ANGELES, CA 90036

Title: S () Delete
Name: KARLSON, NORMAN
Address: 5670 WILSHORE BLVD STE 750
City-St-Zip: LOCKPORT, KY 40036

Title: COO () Delete
Name: SNEGG, LARRY
Address: 5670 WILSHIRE BL., SUITE 750
City-St-Zip: LOS ANGELES, CA 90036

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEOP (X) Change () Addition
Name: KARLSON, SHANNON,
Address: 5670 WILSHIRE BLVD STE 750
City-St-Zip: LOS ANGELES, CA 90036

Title: VP (X) Change () Addition
Name: HATTON, BARBARA
Address: 15 EAST 16TH ST
City-St-Zip: NEW YORK, NY 10003

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: KARLSON, NORMAN
Address: 5670 WILSHIRE BLVD STE 750
City-St-Zip: LOS ANGELES, CA 90036

Title: () Change () Addition
Name:
Address:
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: SHANNON KARLSON

CEOP

04/29/2004

Electronic Signature of Signing Officer or Director

Date