

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000038150

**FILED**  
**Apr 23, 2012**  
**Secretary of State**

**Entity Name:** DESIGNER FLOORS OF SOUTH FLORIDA, INC.

**Current Principal Place of Business:**

601 N. CONGRESS AVE  
SUITE 604  
DELRAY BEACH, FL 33445 US

**New Principal Place of Business:**

**Current Mailing Address:**

601 N. CONGRESS AVE  
STE 604  
DELRAY BEACH, FL 33445 US

**New Mailing Address:**

**FEI Number:** 65-0411443      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LEONE, RICHARD J  
7171 LOCKWOOD RD  
LAKE WORTH, FL 33467 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: LEONE, RICHARD J  
Address: 7171 LOCK WOOD RD  
City-St-Zip: LAKE WORTH, FL

Title: VD  
Name: LEONE, RICHARD J  
Address: 7171 LOCKWOOD DRIVE  
City-St-Zip: LAKE WORTH, FL 33467

I hereby 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 all other like empowered.

SIGNATURE: RICHARD J. LEONE

PRES

04/23/2012

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date