

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



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

DOCUMENT # P93000055128 (1)

1. Corporation Name

BROWARD FLOORING, INC.

Principal Place of Business

**3811 SW 47TH AVENUE
SUITE 625
FT LAUDERDALE FL 33314**

Mailing Address

**3811 SW 47TH AVENUE
SUITE 625
FT LAUDERDALE FL 33314**

**APPROVED
AND
FILED
95 APR 27 AM 7:16**

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

08/03/1993

3a. Date of Last Report

08/02/1994

4. FEI Number

65-0425617

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

2. Principal Place of Business

21

2a. Mailing Address

26

Suite, Apt. #, etc.

SUITE 627

Suite, Apt. #, etc.

SUITE 627

City & State

23

City & State

28

Zip

24

Country

25

Zip

29

Country

30

9. Name and Address of Current Registered Agent

**EVANS, KENNETH A
939 SIESTA KEY BLVD.
APT 623
DEERFIELD BCH. FL 33441**

10. Name and Address of New Registered Agent

81 Name

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

2273 ALBA WAY

83

84 City **DEERFIELD BCH.**

FL

85 Zip Code

33442

11. Pursuant to the provisions of Sections 607.0502 and 607.1503, 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 obligation of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

4/23/95

12. OFFICERS AND DIRECTORS

TITLE **PD**
NAME **EVANS, KENNETH A**
STREET ADDRESS **939 SIESTA KEY BLVD., #623**
CITY - ST - ZIP **DEERFIELD BCH. FL**

TITLE **VD**
NAME **EVANS, JOELLE R**
STREET ADDRESS **939 SIESTA KEY BLVD., #623**
CITY - ST - ZIP **DEERFIELD BCH. FL**

TITLE **SD**
NAME **HERMANS, RICHARD F**
STREET ADDRESS **107 CAMERON COURT**
CITY - ST - ZIP **FT LAUDERDALE FL 33326**

TITLE **TD**
NAME **HERMANS, LISA S**
STREET ADDRESS **107 CAMERON COURT**
CITY - ST - ZIP **FT LAUDERDALE FL 33326**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

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 is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

KENNETH A. EVANS

4/23/95 (S) 581-0067