FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P93000081424

WESTCOAST WOOD FLOORS INC.

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Principal Plac	ce of Business	Mailing	Address				##C#1 FB3B1 11W1 01W1	# (18)1 6)51 1881
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FT. MYERS FL 33907 FT. MYERS FL 33907			RS FL 33907		DO NOT WRITE IN THIS SPACE			
	•					3. Date Incorporated or Qualifed		
2 Dringings F	Place of Business	20 Mail	line Address			11/29/1993 4. FEI Number	т.	
→ "·	riace of Business	 	ling Address			}		pplied For
21 Suito Ant	# ata	26	e, Apt. #, etc.			65-0450745		ot Applicable
Suite, Apt.	. #, 8 iC.	— ·	е, Арг. #, етс.			5. Certifcate of Status Desired	• -	Additional equired
22 City & Stat		27 City	& State			The same of the sa		
· · · ·		—	d State		•	6. Election Campaign Financing Trust Fund Contribution		May Be to Fees
23 . Zip	Country	28 Zip		Country				to rees
24	25	29	30	- ´		This corporation owes the current year Personal Property Tax.	ar intangible ∐Yes	□No
24]	9. Name and Address of Curr			<u>'l</u>		10. Name and Address of New Registe		
- 57 - 17	and the second second			81	Name	TO Hambaria Addiess of Hell Registe	rea rigent	
AUL	LS, FRANK W JR			Ĺ				
115	19 CHARLES TERRACE BLDG.	H-19		82	Street Addr	ess (P.O. Box Number is Not Acceptable)		
	MYERS FL 33907			83			1897 - 1888 -	18 8 8 8
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office or a	registered agent, or both, in the Sta	te of Florida. Su	ich change was autho	orized by	the corporation	oration submits this statement for the purpos on's board of directors. I hereby accept the a	e or changing its ppointment as re	s registered egistered
agent. I a	rm familiar with, and accept the obli	gations of, Sect	ion 607.0505, Florida	Statutes.	•			
SIGNATURE						·		
12.	Signature, typed or printed name of registered a	AND DIRECTOR		13.	t signature required	when reinstating) ADDITIONS/CHANGES TO OFFICER		100 IN 12
TITLE	D OFFICERS /	AND DIRECTOR	DELETE	1,1 TITLE			☐ Change	Addition
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NAME					I .			
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14. 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 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 truetee ampowered 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 with all/other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

FILED

Jan 22, 1999 8:00am

Secretary of State 01-22-1999 90062 039 ***150.00

CR2E034 (11/98)