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

PROFIT **CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

FILED Apr 02 1998 8:00am Secretary of State

	1998 DIVISION OF CORPORATIONS				Scorciary	of State
1. Corporation	MENT # P940(FLOORING, INC.	00023673 (4)			
Principal Place	e of Business	Mailing Address	 			
8241 NW 14 PL 6241 NW 14 PL						
SUNRISE FL	33313	SUNRISE FL 33313			DO NOT WRITE IN TH	S SPACE
					3. Date Incorporated or Qualified	3 SI ACL
					03/23/1994	
	ace of Business	2a. Mailing Address			4. FEI Number	Applied For
21 26 Suite, Apt. #, etc. Suite, Apt. #, etc.			·		65-0479614	Not Applicable
22	π ₁ σ ιο.	27			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	3	City & State			6. Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Count	ry	8. This corporation owes or has paid the	
24	25 9. Name and Address of Curr	ent Registered Agent	30		Personal Property Tax due June 30. 10. Name and Address of New Registers	Yes No
HA	LL, KENNETH	ont trogistored Agent	8	1 Name	10. Name and Address of Hew Registere	a Agent
	11 NW 14 PL				(0.0.5	
	NRISE FL 33313		6	2 Street Add	fress (P.O. Box Number is Not Acceptable)	
			B	3		
			l a	4 City		85 Zip Code
			ĺ		F	
11. Pursuant to office or re	io the provisions of Sections 607.09 o giste red agent, or both, in the Sta	502 and 607.1508, Florida S ite of Florida. Such change v	atutes, the abo as authorized f	ve-named cor by the corpora	poration submits this statement for the purpose ation's board of directors. I hereby accept the a	of changing its registered
agent. f ar	m familiar with, and accept the obl	igations of, Section 607.0505	5, Florida Statut	es.	,,	,,,
SIGNATURE	Signaturo typod or printed name of registered a	agent and title d anchoable	(NOTC: Registered A	gent signature requi	itred when reinstating) DATE	
12.		ND DIRECTORS	13.	•	ADDITIONS/CHANGES TO OFFICERS A	
TITLE			1.1 TITLE			Change Addition
NAME	HALL, KENNETH		1.2 NAME			
STREET ADDRESS	6241 NW 14 PL		1.3 STRE	ET ADDRESS		ļ
CITY-ST-ZIP TITLE	SUNRISE FL 33313	DELETE	1.4 CITY-			[] Oheren [] Addition
NAME	DENISE, HALL	☐ OELETE	2.1 TITLE 2.2 NAMI			Change Addition
STREET ADDRESS	6241 NW 14 PL			ET ADDRESS		
CITY-ST-ZIP	SUNRISE FL		2. 4 City			
TITLE		DELETE	3.1 TITLE		· C*	Change Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREE	et address		
CITY-ST-ZIP		DELETE	3.4. CITY			
TITLE .		C Defete	4.1 TITLE			Change Addition
STREET ADDRESS			4. 2 NAM	T ADDRESS		
CITY-ST-ZIP			4.4 CITY-	i		
TITLE			5.1 TITLE	~		Change Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREE	ET ADDRESS		
CITY-ST-ZIP		TT 25.	54 CITY-			
TITLE		☐ DELETE	61 TITLE			Change Addition
NAME STREET ADDRESS			6.2 NAME			
STREET ADDRESS CITY-ST-ZIP				T ADDRESS		
	ertify that the information supplied	with this filing does not qual	6.4 CITY- fy for the exem		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 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.