UNIFORM BUUMENT # P94)	Jun 08, 2		
Pro Flooring Inc				Secretary of State 06-08-2000 90033 016 ***150.00		
incipal Place of Business	Mailing Address					
101 NW24 Court	8601 NW 24	court				
marise, FL 33322	Sunvise, FL	33355		000607_5	•	
Principal Place of Business 8 601 N W 24 Court Suite, Apt. #, etc.	3. Mailing Address 8601 NU Suite, Apt. #, etc.	ا ۲۶ رصد	+	DO NOT WRITE IN	THIS SPACE	
City & State Suntice	City & State SUNY is C	··-	4. FEI Numbe	0481278	Not	olied For Applicable
F3322 USA	33322	Country US A	>5. Certificate	of Status Desired ====	\$8.75 Addi Fee Required	
6. Name and Address of C	urrent Registered Agent	Name _	7. Name and	Address of New Regist	ered Agent	
LEE, David	<u> </u>	Banks, Richard				
6231 SW 16th Street		Street Add	Street Address (P.O. Box Number is Not Acceptable)			
Pompaus Boh FL 33068			ol: hm 20	t Court		
<u></u>		City Su	inrise		FL Zip Code	322
Signature, typed or printed name of register This corporation is eligible to satisfy its Int Tax filing requirement and elects to do so. (See criteria on back) OFFICER	angible FILE NOW	E: Registered Agent signature [III = E = 1 S.	10. Ele 100 Tru	oction Campaign Financi est Fund Contribution.	☐ Added	O May Be to Fees
PUT	☐ Delete	TITLE	SHANE M (☐ Change	
Banus, Richard		STREET ADDRESS	8601 NW 24	(Cocurt		Addition S
SEOINM 24 C		CITY-ST-ZIP TITLE	Sunase, E	r 33335)	☐ Change	☐ Addition C
Banks, Richard 8601 NW 24 G	,	NAME STREET ADDRESS				
	333-22	CITY-ST-ZIP		·		
LEE, David 623) 5 w 16 stree ST-ZP Pompano Reach	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition
	☐ Dalete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·		☐ Change	Addition
ST 200 IIILE STREET ADDRESS	☐ Delete	TITLE NAME STREET ADDRESS			Change	Addition
CITY ST-ZIP	☐ Delete	CITY-ST-ZIP TITLE			☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	· Uelete	NAME STREET ADDRESS CITY-ST-ZIP				
13. I hereby certify that the information supplindicated on this report or supplemental of the corporation or the receiver or trust	lied with this filing does not qualify for report is true and accurate and that se empowered to execute this repor	my signature shall ha t as required by Cha				
changed, or on an attachment with an ac	ddress, with all other like empowered	J .				1
changed, or on an attachment with a stack wit	ddress, with all other like empowered	J.			954-725 Davtime Phone #	(-414]