FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00 **PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

1997

DOCUMENT # P94000041126 (1)

G.T. FLOORING SUPPLIES, INC.

FILED Apr 28 1997 8:00am Secretary of State



Principal Place of Business 1365 BENNETT DR. UNIT 101		Mailing Addres	ss			n compresson ever conta manda dough manne dingen of the albeit blood finden film of the look			
		1365 BENNETT UNIT 101	DR.						
LONGWOOD	FL 32750	LONGWOOD FI	32750-6361						
US		US				3. Date Incorporated or Qualified 06/01/1994	3a. Date	of Last F	Report
2. Principal	Place of Business	2a. Mailing Ad	dress			4. FEI Number	1		pplied For
21		26				69-0705376		***************************************	ot Applicable
Suite, Ap	t #, etc	Suite, Apt.	#, etc.						Additional
22		27				5. Certificate of Status Desired			equired
City & Sta	ate	City & State	8			6. Election Campaign Financing		\$5.00	May Be
23		28				Trust Fund Contribution			to Fees
Zipi	Country	Z ip		Country		8. This corporation has tiability for it	ntangible ta	x under s	s. 199.032,
24	25	29	30)			Yes 🔲		
	9. Name and Address of Curi	ent Registered Agent				10. Name and Address of New Rec	pistered Ag	ent	
TA	ylor, gregory k			81	Name				İ
13	85 BENNETT DRIVE			82	Street Ac	dress (P.O. Box Number is Not Acceptable	le)		
UN	IIT 101						,		
LO	NGWOOD FL 32750			83					
				84	City			ac 7:-	Codo
				04	City		FL	85 Zip	Code
11. Pursuan	it to the provisions of Sections 607.0	502 and 607.1508, Flo	rida Statutes,	the above	-named co	propration submits this statement for the p	irnose of c	nanging i	ts registered
office or agent 1	registered agent, or both, in the Sta am familiar with, and accept the ob-	ate of Florida. Such cha	ange was auth 7.0505 Florid	orized by a Statutes	the corpor	ration's board of directors. I hereby accep	t the appoir	ntment as	registered
		ingulation of cooper co	7.0000, 7 lona	a Olatotot	•				
SIGNATURE	Signature, typed or printed name of registered	agent and title if applicable	(NOTE: Re	agistered Age	nt signature rec	quired when rainstating)	DATE		
12.	OFFICERS A	ND DIRECTORS	/	13.		ADDITIONS/CHANGES TO OFFIC		RECTO	3S IN 12
T TLE	D	12	DELETE	1.1 TITLE		Tralac Gregory H	· •	Change	Addition
NAME	TAYLOR, GREGORY K			1.2 NAME					
STREET ADDRESS	***			1.3 STREET	ADDRESS	HIUZ N. ZOUNDOL GL			
CHTY-ST-ZiF	ORLANDO FL 32839			1.4 CITY-S	T-ZIP	Taylor Gregory A 4195 N. Jodhpur Ct Ovildo FL 329	65		
TITLE			DELETE	2.1 TITLE				Change	Addition
NAME	1			2.2 NAME				- •	<u></u>
STREET ADDRESS				2.3 STREET	ADDRESS		44		
CHY-ST-ZIP				2. 4 CITY - S					
THE			DELETE	3.1 TITLE				Change	Addition
NAME				3.2 NAME]		-		
STREET ADDRESS				3.3 STREET	ADDRESS				
CITY - ST - ZIP									
TITE			DELETE	3.4. CITY-S	11-216			Change	Addition
NAME		₩.		4.2 NAME			L	2 Summile	CONTROLL
STREET ADDRESS					ADDRESS				
				4.3 STREET					
DITY - ST - ZIP TITLE			DELETE	4.4 CITY-S	I · ZIP		· · · · · · · · · · · · · · · · · · ·	Change	Addition
			VELL IL	5.1 TITLE	- 1		h	Change	☐ Addition
NAMÉ OZOSEZ ASSOCIO				5.2 NAME					
STREET ADDRESS				5.3 STREET					
CITY - ST - ZIP		· · · · · · · · · · · · · · · · · · ·	DE LETE	5.4 CITY-S	I-ZIP			1 60	
TITLE		LJ (DELETE	6.1 TITLE			L.] Change	Addition
NAME				6.2 NAME					
STREET ADDRESS				6.3 STREET	ADDRESS				
City - St - ZiP			<u></u>	6.4 CITY-ST					
 14. Ldo box 	shy certify that the information suppl	and with this filing does	not qualify fo	or the ever	nation state	ed in Section 119 07/3Vi) Florida Statutos	I forther o	relifications	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

401-830-002