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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000085455 (1)

ADDYS COMMERCIAL FLOORING, INC.

FILED Apr 10 1998 8:00am Secretary of State



Principal Place of Business Mailing Address					' lener eren augun bij bir iral
i		ū			
920 W 84 S	Ţ	920 W 84 ST SUITE 207			
HIALEAH FL 33014		HALEAH FL 33014		DO NOT WRITE IN THIS SPACE	
1	-			3. Date incorporated or Qualified	
				11/23/1994	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0535357	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the	
24	25		30	Personal Property Tax due June 30.	Yes No
9, Name and Address of Current Registered Agent 81				10. Name and Address of New Registers	od Agent
SOTO, MAGALY			81 Name		
1398 W. 76 ST.			82 Street Add	dress (P.O. Box Number is Not Acceptable)	
HIALEAH FL 33014			83		
1			83		
İ			84 City	F	85 Zip Code
11. Pursuant	to the provisions of Sections 607.056	02 and 607 1508. Florida Statutes	s the above-named cor	rnoration submits this statement for the purpose	of changing its registered
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 obligations of, Section 607.0505, Florida Statutes.					
1	in landia that, and accept the oblig	pations of, dection dov. 0303, Figi	ica Statutes.		
SIGNATURE	Signature, typed or printed name of registered ag	ent and tille d applicable (NOTE	Registered Agent signature requ	uired when reinstating) DATE	
12.	OFFICERS AN	ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	Р	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	SAROZA, ADDYS		1.2 NAME		
STREET ADDRESS	920 W 84 ST SUITE 207		1.3 STREET ADDRESS		
CITY-ST-ZIP	HIALEAH FL 33014		1.4 CITY - ST - ZIP		
Title	VST	DELETE	2.1 TITLE		Change Addition
NAME	SOTO, MIGUEL JR.		. 2.2 NAME		
STREET ADDRESS	920 W 84 ST SUITE 207		2.3 STREET ADDRESS		
CITY-ST-ZIP	HIALEAH FL 33014		2.4 CITY-ST-ZIP	7777-722	
TITLE		DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP		Deitte	3.4. CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-SI-ZIP		Drutte	4.4 City-St-ZiP		
TITLE		DELETE	51 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		☐ DELETE	5.4 CITY - ST - ZIP		
TITLE		☐ DETER	6.1 TITLE		Change Addition
NAME OTRECT LORDES			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY+ST-ZIP			6.4 CITY - ST - ZIP		

14. Thereby 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 roport or supplemental annual roport 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 trusten 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 an approximately with address.

SIGNATURE:

305)825-7887