

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996 5-1-96

B-3179

C

DOCUMENT # P95000007207 (0)

1. Corporation Name

AMERICAN FLOOR, INC.

65-00554463



Principal Place of Business

100 EAST SAMPLE ROAD
POMPANO BEACH FL 33064

Mailing Address

100 EAST SAMPLE ROAD
POMPANO BEACH FL 33064

3. Date Incorporated or Qualified

01/27/1995

3a. Date of Last Report

2. Principal Place of Business

21

Suite, Apt. #, etc.

22 3200 SW 46th Ave.

23 City & State

23 Davie FL

24 Zip

24 33314

25 Country

25 USA

2a. Mailing Address

26

Suite, Apt. #, etc.

27 P.O. Box 4367

28 City & State

28 Deerfield Beach, FL

29 Zip

29 33442

30 Country

30 USA

4. FEI Number

65-0554463

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

JOHNSON, JOHN R
100 EAST SAMPLE ROAD
POMPANO BEACH FL 33064

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

82 1500 S.E. 3 ST

83 Suite # 202

84 City

84 Deerfield Beach

85 Zip Code

85 FL 33442

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.

SIGNATURE

Signature typed or printed name of officer or director (Signature required for agent)

Signature typed or printed name of officer or director (Signature required for agent)

DATE

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

D

JOHNSON, JOHN R

100 EAST SAMPLE ROAD

POMPANO BEACH FL 33064

☒ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

☐ DELETE

TITLE

NAME

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CITY - ST - ZIP

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TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE

12. NAME

13. STREET ADDRESS

14. CITY - ST - ZIP

DV/P

Clement Proulx

3200 SW 46th Ave

Davie FL 33314

☒ Change

☐ Addition

2. TITLE

22. NAME

23. STREET ADDRESS

24. CITY - ST - ZIP

SDV/P

Andre Prince

3200 SW 46th Ave

Davie FL 33314

☐ Change

☒ Addition

3. TITLE

32. NAME

33. STREET ADDRESS

34. CITY - ST - ZIP

DP

Guy Lebouef

3200 SW 46th Ave.

Davie FL 33314

☐ Change

☒ Addition

4. TITLE

42. NAME

43. STREET ADDRESS

44. CITY - ST - ZIP

☐ Change

☐ Addition

5. TITLE

52. NAME

53. STREET ADDRESS

54. CITY - ST - ZIP

☐ Change

☐ Addition

6. TITLE

62. NAME

63. STREET ADDRESS

64. CITY - ST - ZIP

☐ Change

☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Andre Prince VA/22/96 954 321-0200

Date

Original Printout

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