

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
TAMARA L. MATHIAS
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000033475 (1)

T & S FLOOR COVERINGS, INC.



881 109TH AVENUE NORTH
NAPLES FL 33963

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NAPLES FL 33963

2. Principal Place of Business
21. 881 109th Ave. North
22.
23. Naples, Florida
24. 33963
25. Collier
26. same
27.
28. Naples, Florida
29. 33963
30. Collier
9. Name and Address of Current Registered Agent

LOCKER, JOSEPH R JR.
2150 GOODLETTE ROAD
6TH FLOOR
NAPLES FL 33940

3. Date Incorporated or Qualified 04/28/1995
3a. Date of Last Report last year
4. EIN Number 65-0576635
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required
6. Election Campaign Financing ☐ \$5.00 May Be Added to Fees
7. Has corporation had liability for intangible tax under s. 190.042, Florida Statutes? ☐ Yes ☒ No
10. Name and Address of New Registered Agent

81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83.
84. City
85. Zip Code FL

11. I, the undersigned, being a resident of the State of Florida, do hereby certify that the above named corporation is a corporation organized under the laws of the State of Florida, and that the information herein is true and correct to the best of my knowledge and belief.

12. OFFICERS AND DIRECTORS
Owner/Partner Antonio Frisa
396 Connors Ave.
Naples, FL 33963
Partner James Frisa
484 Ibis Way
Naples, FL 33940

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1. Name ☐ Change ☐ Addition
2. Name ☐ Change ☐ Addition
3. Name ☐ Change ☐ Addition
4. Name ☐ Change ☐ Addition
5. Name ☐ Change ☐ Addition
6. Name ☐ Change ☐ Addition
7. Name ☐ Change ☐ Addition
8. Name ☐ Change ☐ Addition
9. Name ☐ Change ☐ Addition
10. Name ☐ Change ☐ Addition
11. Name ☐ Change ☐ Addition
12. Name ☐ Change ☐ Addition
13. Name ☐ Change ☐ Addition
14. Name ☐ Change ☐ Addition
15. Name ☐ Change ☐ Addition
16. Name ☐ Change ☐ Addition
17. Name ☐ Change ☐ Addition
18. Name ☐ Change ☐ Addition
19. Name ☐ Change ☐ Addition
20. Name ☐ Change ☐ Addition

14. I, the undersigned, being a resident of the State of Florida, do hereby certify that the above named corporation is a corporation organized under the laws of the State of Florida, and that the information herein is true and correct to the best of my knowledge and belief.

SIGNATURE: Antonio Frisa ANTONIO FRISA 1/18/96 941-594-3009
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)