


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

FILED
Jul 25 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P95000042046 (9)**

1. Corporation Name
KITTLE'S FLOORING COMPANY

Principal Place of Business

**5998 S.W. 44TH STREET
DAVIE FL 33314
US**

Mailing Address

**5998 S.W. 44TH STREET
DAVIE FL 33314-3643
US**

2. Principal Place of Business

21 **197 SW 20 Way**

Suite, Apt. #, etc.

22

City & State

23 **Dania FL**

Zip

24 **33004**

Country

25 **USA**

2a. Mailing Address

26 **197 SW 20 Way**

Suite, Apt. #, etc.

27

City & State

28 **Dania FL**

Zip

29 **33004**

Country

30 **USA**

3. Date Incorporated or Qualified

05/25/1995

3a. Date of Last Report

04/16/1996

4. FEI Number

65-0585617

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing

☐

**\$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

**KITTLE, DAN
5998 S.W. 44TH STREET
DAVIE FL 33314**

10. Name and Address of New Registered Agent

81 Name

Kittle, Dan

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

197 SW 20 Way

83

84 City

Dania

FL

85 Zip Code

33004

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



(NOTE: Registered Agent signature required when reinstating)

DATE

7-8-97

12. OFFICERS AND DIRECTORS

TITLE	PSD	<input type="checkbox"/> DELETE
NAME	KITTLE, DAN	
STREET ADDRESS	5998 S.W. 44TH STREET	
CITY-ST-ZIP	DAVIE FL	

TITLE	VTD	<input type="checkbox"/> DELETE
NAME	KITTLE, CHERYL	
STREET ADDRESS	5998 S.W. 44TH STREET	
CITY-ST-ZIP	DAVIE FL	

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PSD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Kittle, Dan	
1.3 STREET ADDRESS	197 SW 20 Way	
1.4 CITY-ST-ZIP	Dania FL 33004	

2.1 TITLE	VTD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	Kittle, Cheryl	
2.3 STREET ADDRESS	197 SW 20 Way	
2.4 CITY-ST-ZIP	Dania FL 33004	

3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		

4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		

5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		

6.1 TITLE	000002251968	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	-07/30/97--01014--011	
6.3 STREET ADDRESS	***61.25	
6.4 CITY-ST-ZIP		

14. I do hereby 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 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:



7-8-97