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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

FILED Mar 26 1998 8:00am Secretary of State

	MENT # P950(LL FLOOR SYSTEMS, IN		2 (6)			
Principal Place of Business Mailing A			g Address			
3500 ALOMA AVE 3			3500 ALOMA AVE			
W15		W15	W15			DO AIOT MOITE IN THIS SPACE
WINTER PARK US	FL 32792		WINTER PARK FL 32792 US			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified
03		03				07/18/1995
2. Principal P	lace of Business	2a, Mailing	2a. Mailing Address			4. FEI Number Applied For
21		26	26			59-3392526 Not Applicable
Suite, Apt.	#, etc.	Suite, A	Suite, Apt. #, etc.			5 Certificate of Status Desired \$8.75 Additional
22		27				Fee Required
City & State	е	⊢-ı ´	City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution ☐ Added to Fees
23 Zip	Country Zip C			Country	,	Trust Fund Contribution
24	25	29	30	-n '		Personal Property Tax due June 30. Yes No
	g, Name and Address of Cur			<u> </u>		10. Name and Address of New Registered Agent
DE/	VRDEN, MILES C JR			81	Name	е
3500 ALOMA AVE				82	Street	et Address (P.O. Box Number is Not Acceptable)
W-1	· -		<u> </u>			
WINTER PARK FL 32792				83		
				64	City	85 Zip Code
dd Director	- the initial of Contract Con 7.	2002	Classific Charles	No obou		FL S Zip code
 Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the office or registered agent, or both, in the State of Florida. Such change was authoragent. I am familiar with, and accept the obligations of, Section 607.0505, Florida. 					y the corp	orporation's board of directors. I hereby accept the appointment as registered
	m familiar with, and accept the of:	oligations of, Section	607.0505, Florid	da Statute	S.	
SIGNATURE	Signature, typed or preted name of registered	agest and tile if application	(NOTE F	Registered Age	ent signature	ure required when reinstating) DATE
12.	OFFICERS AND DIRECTORS			13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D		DELETE	1.1 TITLE		Change Addition
NAME	DEARDEN, MILES C JR.			1.2 NAME		DEARDEN, MILES C JR
STREET ADDRESS			1.3 STREET		3500 ALOMA AUE W-15 WINTER PARK FL 32792	
CITY-ST-ZIP	FORT-LAUDERDALE-FL-33		T DELETE	1.4 CITY-ST-ZIP		
TITLE		L	_ DELETE	2.1 TITLE		Change L. Addition
NAME Street address				2.2 NAME 2.3 STREET	Annorce	
CITY-ST-ZIP			2.4 CITY-SI			`
TITLE	DELETE		3.1 TITLE	U 7 - LII	☐ Change ☐ Addition	
NAME		_		3.2 NAME		
STREET ADDRESS				3.3 STREET	ADDRESS	;
CITY-ST-ZIP				3.4. CITY-	ST-ZIP	<u> </u>
TITLE	· · - · - · · · · · · · · · · · · · · ·		DELETE	4.1 TITLE		Change Addition
NAME				4. 2 NAME		
STREET ADDRESS				4.3 STREET	ADDRESS	;
CITY-ST-ZIP			1 prices	4.4 City - S	ST - ŽIP	
TITLE	DELETE		_) Utitit	5.1 TITLE		☐ Change ☐ Addition
NAME				5.2 NAME	LODOTOR	
STREET ADDRESS				5.3 STREET		`
CITY-ST-ZIP TITLE		г	DELETE	5.4 CHTY-S 6.1 TITLE	ı - ZIP	Change Addition
NAME				6.2 NAME		
STREET ADDRESS				6.3 STREET	ADDRESS	,
City, St. 7iP				6.4 CITY-S		

14. Thereby certify that the information supplied with this filing doos 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.

M. E DEADDEN For

407678 8335