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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000058850

1. Corporation Name

NORTH COUNTY FLOORING, INC.

Principal Place of Business
155 PENNOCK TRACE DR
JUDITER EL 33458

Feb 26, 1999 8:00 am Secretary of State

02-26-1999 90069 044 ***150.00

Principal Place of Business	Mailing Address			DDIBL OTER IDIBL 18401 Ditt onti 1991
155 PENNOCK TRACE DR JUPITER FL 33458	155 PENNOCK TRACE DR JUPITER FL 33458			
US	US		DO NOT WRITE IN	THIS SPACE
			3. Date Incorporated or Qualifed 07/28/1995	
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21 North County Flooring Inc. Suite, Apt. #, etc.	26 284 River Dr.		65-0585601	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22 284 River Dr.			5. Certificate of Status Desired	Fee Required
City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
23 Tequesta FL:	28 Tegneste FL	·	Trust Fund Contribution	Added to Fees
Zip Country	Zip 374/49	Country	This corporation owes the current ye	
24 33 469 [25 US]	29 33767 3	0	Personal Property Tax.	Yes □No
9. Name and Address of Current	Registered Agent	B4 Nome	10. Name and Address of New Registr	ered Agent
MATTIES EDMIN C		81 Name	dwin C. Wattles Jr.	}
Wattles, Edwin C 6285 Launch Club Circle		82 Street Add	ress (P.O. Box Number is Not Acceptable)	
			River Dr.	
JUPITER FL 33458		83		
		84 City		85 Zip Code
		1 700	nesta	FL 33469
Pursuant to the provisions of Sections 607.0502 office or registered agent, or both, in the State of agent. I am familiar with, and accept the obligation.	Florida, Such change was auth	horized by the corporat	poration submits this statement for the purpo ion's board of directors. I hereby accept the a	se of changing its registered appointment as registered
SIGNATURE Lowe (. Color)	AND TO BE AN ANOTE: S	egistered Agent signature requir	ed when reinstating) DA	
Signature, typed or printed name of registered agent a OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICER	
TITLE D	☐ DELETE		CAM CUELE	Change Z Addition
NAME WATTLES, EDWIN C. JR		[<i>i</i>		
STREET ADDRESS 6285 LAUNCH CLUB CIRCLE		■ 1.2 NAME 4~1	you Wattle	4
		1.2 NAME L.	gy River Or.	4
A IDITED EL		1.3 STREET ADDRESS 2	ynn Wattles gy River Or. Fegues ta FL. 33469	4
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OTTY-ST-ZIP JUPITER FL TITLE President	☐ DELETE	2.1 TITLE 2.2 NAME	ynn Wattled gy River Or. Tegwas ta FL. 33469	
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CITY-ST-ZIP JUPITER FL TITLE President Edwin L. Wa Hus Jr. STREET ADDRESS CITY-ST-ZIP JUPITER FL President February 1 33 469	☐ DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	ynn Wattled gy River Or. Tegwas ta FL. 33469	
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14. I 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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

Daytime Phone #