## 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

## **FILED** Mar 29, 1999 8:00 am Secretary of State

03-29-1999 90036 028 \*\*\*150.00

1. Corporatio	MEN I # <b>P9500</b> S FLOORS, INC.	0084947				I ACRAMANA AND NEWAN RANA BRANA BRANA BRANA BRANA	RIEL IBILL BLOID LOIN	HELL HELL LEEK
Principal Plac		Mailing Address						
2966 1ST PLAC		P.O. BOX 187	20004					
VERO BEACH FL 32968 VERO BEACH FL 32961 US						DO NOT WRITE IN T	HIS SPACE	
00					}	3. Date Incorporated or Qualifed		
					i	11/02/1995		
2. Principal Place of Business 2a. Mailing Address			ess			4. FEI Number	Ар	plied For
21		26				65-0625732	No	t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #,	Suite, Apt. #, etc.			5. Certifcate of Status Desired	\$8.75 A	
22		27				5. Certificate of Citation Desired	Fee Re	quired
City & Stat	e	City & State			, : ·	6. Election Campaign Financing	\$5.00	
23		28				Trust Fund Contribution	Added to	o Fees
Žip ─_	Country	Zip		untry		8. This corporation owes the current year	r Intangible ☐ Yes	⊠No
24	[25]	29	30	1		Personal Property Tax.  10. Name and Address of New Register		≥ NO
<del></del>	9. Name and Address of Curi	rent Kegisterea Agent		81 Name		10. Isquire and Adoless of Isaa Kediste.	rea Agent	
BEL	L, MICHAEL L.							
2966 1ST PLACE				82 Street	Addres	s (P.O. Box Number is Not Acceptable)		
VERO BEACH FL 32968				83				
				84 City			85 Zip C	Code
11. Pursuant office or r agent. I a SIGNATURE	m tamiliar with, and accept the obli	igations of, Section 607.0	505, Florida Sta	tutes.		ation submits this statement for the purpos s board of directors. I hereby accept the ap		registered gistered
	Signature, typed or printed name of registered			d Agent signature	required w			DC IN 12
TITLE	P	AND DIRECTORS	13. LETE 1.11	<del></del>	Т	ADDITIONS/CHANGES TO OFFICERS	Change	Addition
NAME	BELL, MICHAEL L.			IAME				_
STREET ADDRESS	0000 40T DLAOF			TREET ADDRESS				
	VERO BEACH FL			CITY-ST-ZIP	Ί			
CITY-ST-ZIP TITLE	V	□ DE					☐ Change	Addition
NAME	BELL, TERI S.			AME				_
STREET ADDRESS				TREET ADDRESS				
CITY-ST-ZIP-	VERO BEACH FL			CITY-ST-ZIP		المناسب المراسب	سعد بدنيد	
TITLE	72.10.22.10.11.12	□ DE					Change	☐ Addition
NAME	1			IAME				
STREET ADDRESS				TREET ADDRESS	3			
CITY-ST-ZIP			3.4.	CITY-ST-ZIP				
TITLE	,			TITLE	1		☐ Change	Addition
NAME			4, 2	NAME				
STREET ADDRESS			4.3 5	TREET ADDRESS	3			
CITY-ST-ZIP			4.4 (	CITY-ST-ZIP				
TITLE		□ DE			1		☐ Change	Addition
NAME			5.21	IAME	[ ,			'
STREET ADDRESS			5.3 5	TREET ADDRESS	<b>;</b>			
CTY-ST-ZIP			5.4 (	CITY-ST-ZIP				
TITLE		☐ DE	LETE 6.1 T	ITLE			Change	☐ Addition
NAME	•		6.2 1	IAME				
STREET ADDRESS	1		635	TREET ADDRESS	<b>;</b>			í

CITY-ST-ZIP the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information 14. I hereby certify that the information supplied with this filing loes not qualify for indicated on this annual report or supplemental annual officer or director of the corporation or the receiver or the Block 12 or Block 13 if changed or on a principle of the province of the corporation or the receiver or the Block 12 or Block 13 if changed or on a principle of the province of the corporation of the Block 12 or Block 13 if changed or on a principle of the Block 12 or Block 13 if changed or on a principle of the Block 12 or Block 13 if changed or on a principle of the Block 13 if changed or on a principle or on a and that my signature shall have the same legal effect as if made under oath; that I am an ite this report as required by Chapter 607, Florida Statutes; and that my name appears in

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS