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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P95000094186 (0)

	IDWOOD FLOORS, INC.						
Principal Place	e of Business 🦠 🤊	Mailing Address			I 48811581 118 laten duch aden aufen ante	i Maile iffilt mindt benat ibern bier imbe	
1722 W HENRY AVE TAMPA FL 33603-1110 TAMPA FL 33603-1110						The second secon	
					3. Date Incorporated or Qualified 12/11/1995	3a. Date of Last Report 09/12/1996	
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	Applied For	
21 26					59-3360241	Not Applicable	
Suite, Apt	Suite, Apt #, etc.	uite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required		
22 27					6 Floring Comparing Financing		
···	t;	28	n '		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Z (p)	Country	Zip	Cou	intry	8. This corporation has liability for		
24	25	29	30	,	Florida Statutes	Yes No	
	9. Name and Address of Curr	rent Registered Agent			10. Name and Address of New Re	gistered Agent	
	IALDI, MICHAEL J			81 Name			
4949 MARBRISA DRIVE				82 Street Addr	ddress (P.O. Box Number is Not Acceptable)		
SUITE 1405				83			
TAMPA FL 33624							
				84 City		FL 85 Zip Code	
11. Pursuant office or r	to the provisions of Sections 607.0 registered agent, or both, in the Starm familiar with, and accept the ob-	502 and 607.1508. Florida Statu ate of Florida. Such change was ligations of, Section 607.0505, F	ites, the a authorize lorida Sta	bove-named corp d by the corporat tutes.	poration submits this statement for the tion's board of directors. I hereby acce	purpose of changing its registered pt the appointment as registered	
SIGNATURE							
	Signature, typed or printed name of registered			d Agent signature requi	red when reinstating) ADDITIONS/CHANGES TO OFFI	DATE	
12.	DIFFICENS A	AND DIRECTORS DELETE	13. 1.1 Ti	TIE I	ADDITIONS/CHANGES TO OFFI	Change Addition	
NAME	LOPEZ, JOSEPH A	C. Ottoric	1.2 N				
	1722 W. HENRY AVENUE			TREET ADDRESS			
STREET ADDRESS	TAMPA FL 33603			ITY-ST-ZIP			
DITY - ST - ZiP			2.1 T			Change Addition	
NAME	***************		2.2 N	AME		_	
STREET ADDRESS	6225 N. DALE MABRY HWY.			TREET ADORESS			
C(1) - ST - 7(P	TAMPA FL 33614	•	2 4 0	CITY-ST-ZIP			
TITLE	ST	DELETE	3.1 T	ПLE		Change Addition	
NAME	LOPEZ, JENNY	1	3.2 N	AME			
STREET ADDRESS	1722 W. HENRY AVENUE		3.3 S	TREET ADDRESS			
CITY-ST ZIP	TAMPA FL 33603		3.4. 0	CITY-ST-ZIP	<u> </u>		
TITLE		L DELETE	4.1 T	1		Change Addition	
NAME				NAME			
STREET ADDRESS	1			TREET ADDRESS			
CHY-51-ZF		DELETE	4.4 C	ITY-ST-ZIP		Change Addition	
TITLE		ليا مديورو		IAME		C. C	
NAME STREET ADDRESS				TREET ADDRESS			
CHY-SI-ZIP			1	HTY-ST-ZIP			
TITLE		☐ DELETE	61T			☐ Change ☐ Addition	

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 of 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 on a legal, or on an attachment with an address.

64 City-ST-ZIP

62 NAME 63 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

813-879-4613

FILED

May 08 1997 8:00am

Secretary of State