2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 21, 2003 8:00 am
Secretary of State
08-21-2003 90106 037 ***550.00

DOCUMENT # P95000096028

1. Entity Name
1350 SOUTH OCEAN BOULEVARD, INC.

Principal Place of Business	Mailing Address
1215 E BROWARD BLVD FT LAUDERDALE FL 33301	1215 E BROWARD BLVD FT LAUDERDALE FL 33301

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
1350 S. OCEAN BLVD.	1700 E. LAS. OLAS BLVD
Suite, Apt. #, etc.	Suite, Apt. #, etc. PH-1
City & State POMPANO BCH., FL	City & State FT. LAUDERDALE, FL
Zip / Country 33062 / BROWARD	Zip / Country 33301 / BROWARD

4. FEI Number 65-0644687 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
CRAWFORD, ROBERT W 1215 E BROWARD BLVD FT LAUDERDALE FL 33301	Name: DAVIS W. DUKE, JR., ESQ. Street Address (P.O. Box Number is Not Acceptable): 1700 E. LAS OLAS BLVD., PH-1 City: FORT LAUDERDALE FL Zip Code: 33301

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: [signature] DAVIS W. DUKE, JR. 8-19-03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $550.00
After September 10, 2003 Fee will be $750.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CRAWFORD, ROBERT W 1215 E BROWARD BLVD FT LAUDERDALE FL 33301	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PRESIDENT / DIRECTOR MARY COOPER 2541 N. KENYONVILLE RD. ALBION, NY 14411	☒ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V.P. / DIR. DEKRISTIE ADAMS 423 E ST. DAVIS, CA 95616	☒ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SEC. TREAS. / DIR. MINDEE ADAMS 423 E ST. DAVIS, CA 95616	☒ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E034 (4/03)

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] Mary Cooper 8/14/03
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Attachment

801394113
P00000114900

FLOORS BY CORAL INC.
7684 N. NOB HILL RD.
TAMARAC FLORIDA 33321
954-718-6222

TO WHOM IT MAY CONCERN :

This letter is to advise that I did not receive prior notice as to filing corporate business report

Enclosed is new form with all changes as to adress

Thank you for your consideration

sincerely yours,

larry j. feldman v.p.