

FILE NOW: FILING FEE AFTER MAY 1 IS \$50.00

P95000098016

FILED

97 DEC -2 AM 8:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROF
CORPORATION
ANNUAL REPORT
1997



SECRETARY OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000098016
1. Corporation Name

VIC'S FLOOR COVERING, INC.

Principal Place of Business Mailing Address
2467 N. John Young Parkway 2467 N. John Young Parkway
Orlando, FL 32804 Orlando, FL 32804

| | |
|---|-----------------------------------|
| 3. Date Incorporated or Qualified 12/19/1995 | 3a. Date of Last Report |
| 4. FEI Number 59-3365605 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |
| 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> | \$5.00 May Be Added to Fees |
| 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No | |

| | |
|--------------------------------|------------------------|
| 2. Principal Place of Business | 2a. Mailing Address |
| 21 Suite, Apt. #, etc. | 26 Suite, Apt. #, etc. |
| 22 City & State | 27 City & State |
| 23 Zip Country | 28 Zip Country |
| 24 | 29 |
| 25 | 30 |

9. Name and Address of Current Registered Agent

Victor Capello
2467 N. John Young Parkway
Orlando, FL 32804

10. Name and Address of New Registered Agent

| | |
|---|-------------------|
| 81 Name | |
| 82 Street Address (P.O. Box Number is Not Acceptable) | |
| 83 | |
| 84 City | 85 Zip Code FL |

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes

SIGNATURE _____
Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

WORKED REINSTATEMENT TO THE INC NOT REC S.O.S. FIRST AR. DC 12-2-97

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|----------------------------|---|---|---|
| TITLE | President/CEO <input type="checkbox"/> DELETE | 1.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | Capello, Victor | 1.2 NAME | |
| STREET ADDRESS | 2467 N. John Young Parkway | 1.3 STREET ADDRESS | |
| CITY-ST-ZIP | Orlando, FL 32804 | 1.4 CITY-ST-ZIP | |
| TITLE | VP <input type="checkbox"/> DELETE | 2.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | Capello, Debbie | 2.2 NAME | |
| STREET ADDRESS | 2467 N. John Young Parkway | 2.3 STREET ADDRESS | |
| CITY-ST-ZIP | Orlando, FL 32804 | 2.4 CITY-ST-ZIP | |
| TITLE | <input type="checkbox"/> DELETE | 3.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | 3.2 NAME | |
| STREET ADDRESS | | 3.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 3.4 CITY-ST-ZIP | |
| TITLE | <input type="checkbox"/> DELETE | 4.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | 4.2 NAME | |
| STREET ADDRESS | | 4.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 4.4 CITY-ST-ZIP | |
| TITLE | <input type="checkbox"/> DELETE | 5.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | 5.2 NAME | |
| STREET ADDRESS | | 5.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 5.4 CITY-ST-ZIP | |
| TITLE | <input type="checkbox"/> DELETE | 6.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | 6.2 NAME | |
| STREET ADDRESS | | 6.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 6.4 CITY-ST-ZIP | |

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-12/02/97-01085-002
****165.00 ****165.00

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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.

SIGNATURE: Victor Capello
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date _____ Daytime Phone # _____

CR2E034 (9/96)

P95000098016

VIC'S FLOOR COVERING, INC.

2467 N. John Young Parkway
Orlando, Florida 32804

Phone & Fax (407) 578-1998

November 3, 1997

Attn: Darlene Connell
Department of State
Division of Corporations
409 East Gaines Street
Tallahassee, Florida 32399

(904) 487-6906

Re: Reinstatement Form - Document #P95000098016
FEI 59-3365605

Please note our new address: 2767 N. John Young Parkway
Orlando, Florida 32804

Dear Darlene:

Hopefully you will remember us and perhaps you can help in this situation. I have been trying to get you over the telephone (above number) but it never answers. Please let me know if this is the same number. In reference to the notice we received last week, (copy attached), advising of the dissolution of the corporation. This is to advise you that a check #1716-1 was sent April 26th, 1997 in the amount of \$165.00 to the Department of State for the Annual Report Fee and Corporate Supplemental Fee that was due. Believing that all was received accordingly, we were surprised when we received this notice.

I checked with our bank statements and canceled checks immediately, was not able to find the check in the statement nor was it returned to us from the bank. I requested our bank to research further and they came up with the same. They never received the canceled check and it was never posted.

Due to this mishap, I was wondering if there is any way you can advise us what the procedure would be for a missing or lost check in the mail which we did not know your offices did not receive, and if we can just send you another check, certified, return receipt immediately for the \$165.00.

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Page (2)
Darlene Connell

Victor has been trying to call you, it seems that the number never answers or its always busy. Please let me know if the area code changed or if you have another number where he can reach you. If you can, please call him or leave a message on our machine.

Thanking you in advance Darlene for all the assistance you have always given me through the years. I really appreciate you.

Sincerely,



(andy, asst to:)
Victor Capello, CEO, Pres.

VC.a
Enclosure

