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

Mailing Address

6948-G VENTURE CIRCLE

ORLANDO FL 32807

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business

6948-G VENTURE CIRCLE ORLANDO FL 32807



FLORIDA DEPARTMENT OF STATE

FILED

Apr 24 1998 8:00am

Secretary of State

41548 407-608-8880

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000025384 (4)

A & P FLOORING SPECIALIST, INC.

DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified <u>04/01/1996</u> 2a. Mailing Address 4. FEI Number Applied For 2. Principal Place of Business 59-3371873 Not Applicable 21 26 Suite. Apt. #. etc \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 27 City & State \$5.00 May Be City & State 6. Election Campaign Financing Trust Fund Contribution Added to Fees 28 23 Country Zip Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. X Yes ☐ No 24 30 29 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name CORNELIUS, MARGARET L 8948-G VENTURE CIRCLE Street Address (P.O. Box Number is Not Acceptable) ORLANDO FL 32807 85 Zip Code 84 City 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. DELETE TITLE 1.1 TITLE CORNELIUS, ALVIN E SR. 1.2 NAME NAME **6948-G VENTURE CIRCLE** 1.3 STREET ADDRESS STREET ADDRESS ORLANDO FL 32807 1.4 CITY - ST - ZIP CITY-ST-ZIP Change Addition DELETE 2.1 TITLE TITLE CORNELIUS, MARGARET L 2.2 NAME NAME **6948-G VENTURE CIRCLE** STREET ADDRESS 2.3 STREET ADDRESS ORLANDO FL 32807 CITY-ST-ZIP 2. 4 CITY-ST-ZIP Addition DELETE Change 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Addition DELETE 4.1 TITLE Change TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4 4 CITY - ST - ZIP CITY-ST-ZIP Addition Change ☐ DELETE 51 TITLE TITLE 52 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 54 CITY-ST-ZIP CITY-ST-ZIP Addition Change DELETE 6 1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 14. Thereby 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.

MAGGARET L. CORNELIUS