FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00 PROFIT ELORIDA DEPARAMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State **DIVISION OF CORPORATIONS** 1997 DOCUMENT # P96000043936 (9) FLOOR TRENDS OF FLORIDA, INC. Principal Place of Business Mailing Address 1205 LAKE AVENUE WEST 1205 LAKE AVENUE WEST LAKE WORTH FL 33460 LAKE WORTH FL 33460-3603 3. Date Incorporated or Qualified 3a. Date of Last Report 05/16/1996 4. FEI Number 2. Principal Place of Business 28. Mailing Address Applied For 26 65-0669 696 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Country Zip This corporation has liability for intangible tax under s. 199.032, Yes No 24 25 29 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent KEMP, SEBRAN WES 81 1205 LAKE AVENUE WEST Street Address (P.O. Box Number is Not Acceptable) 82 LAKE WORTH FL 33460 83 84 City 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutos, the above-named corporation submits this statement for the purpose of changing its 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 life if applicable (NOTE Registered Agent signature required when reinstating) DATE 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE 1.1 1111.6 Change Addition TITLE KEMP, SEBRAN WES NAME 1.2 NAME **201 2ND LANE** STREET ADDRESS 1.3 STREET ADDRESS LAKE WORTH FL 33463 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition TITLE 2.1 TITLE KEMP, SANDRA NAME 2.2 NAME **201 2ND LANE** STREET ADDRESS 2.3 STREET ADDRESS LAKE WORTH FL 33463 CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Addition 3.1 THLE Change TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3 4. C(1Y - ST - Z)P TITLE DELETE 4 1 TITLE Change Addition NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 C(1Y - S1 - Z)P DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

6.4 C/TY-ST-ZIP

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 sertify 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 of 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 charged, or on an attachment with an address.

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