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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000034145 (7)

FLOORING CONCEPTS, INC.

Principal Place of Business

25-A NW 16TH AVENUE

Mailing Address

25-A NW 16TH AVENUE

FILED May 22 1998 8:00am Secretary of State



GAINESVILLE FL 32601		GAINESVILLE FL 32601			DO NOT WRITE IN THIS SE	DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualified				
					04/15/1997				
2. Principal Pi	ace of Business	2a. Mailing Address			4. FEI Number	17	Applied For		
21		26			59- 3.1 43457	59 -34 43457			
Suite, Apt #, etc.		Suite, Apt #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required			
City & State	3	City & State			6. Election Campaign Financing	\$5.0	O May Be		
23		28			Trust Fund Contribution		d to Fees		
Zip	Country	Zip	Cou	intry	8. This corporation owes or has paid the curre	nt year I	ntangible		
24	25	29	30				□No		
	9. Name and Address of Currer	nt Hegistered Agent		64 No.	10. Name and Address of New Registered Ag	jent			
	EFFIELD, EUGENE E			81 Name	Sheffield, Eugene E.				
	O S W WILLISTON ROAD N es ville FL 32608				Address (P.O. Box Number is Not Acceptable) O. SW. Williston Road, Suite 14	02			
			i	84 City	Gainesville, Fl FL	85 Zip	o Code 2608		
11. Pursuant to office or reagent. Lar	o the provisions of Sections 607.050 ogistered agent, or both, in the State in fami liar with, and accept the obliga	2 and 607.1508, Florida Statu of Florida Such ch <mark>ange was</mark> alions of, Section <mark>607.0505,</mark> F	ites, the at authorized lorida Stat	nove-named d by the corp utes	corporation submits this statement for the purpose of cooration's board of directors. I hereby accept the appoi	hanging	ite registered		
SIGNATURE	Signature: typed or printed harve of is general, ago	or and tile it applicable. (NO	III - Registerer	1 Anone signaturo	required when reinstating) DATE				
12.	OFFICERS AN		13.	Trigo II orginalisio	ADDITIONS/CHANGES TO OFFICERS AND D	IRECTO	DRS IN 12		
TITLE	D	DELÉTE	1.1 10	rLE		Change			
NAME	SHEFFIELD, EUGENE E		1.2 NA	ME	Sheffield, Eugene E	^ _	-X		
STREET ADDRESS	2600 SW WILLISTON ROAD		1.3 ST	REE1 ADDRESS		- 146	30		
CITY-ST-ZIP	GAINESVILLE FL 32608		1.4 Ci	IY-ST-ZIP	2600 SW Williston Road, Suite	3 140)2		
TITLE		DELFTE	21 18	LE	Gainesville, Fl 32608	Change	Addition		
NAME			2 2 NA	MF		-			
STREET ADDRESS	-		2.3 ST	REFT ADDRESS					
CITY-ST-ZIP			2. 4 CI	TY-ST-ZIP					
TITLE		☐ DELETE	3.1 117	L E	E	Change	Addition		
NAME			3.2 NA	ME					
STREET ADDRESS			3.3 ST	REE1 ADDRESS					
CITY-ST-ZIP			3.4. CI	TY-ST-ZIP					
TITLE		☐ DELETE	4.1 10	LE		Change	Addition		
NAME			4. 2 N/	AME					
STREET ADDRESS			4.3 \$1	REET ADDRESS					
CITY-ST-ZIP			4.4 CH	IY-SI-7IP					
TETLE		☐ DELETE	5 1 TiT	LE		Change	Addition		
NAME			5.2 NA	ME					
STREET ADDRESS			5.3 ST	REET ADDRESS					
CITY-ST-ZIP			5.4 CIT	Y-ST-71P					
TITLE		DELETE	6.1 11	LE	·	Change	Addition		
NAME			6.2 NA	ME					
STREET ADDRESS			6.3 ST	RÉET ADORESS					
CITY-ST-ZIP			6.4 CIT	Y-ST-ZIP					

14. 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 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.