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

**PROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P9700056093

1. Corporation Name

Principal Place of Business	Mailing Address
1171 COMMERCE AVE.	1171 COMMERCE AVE.
VERO BEACH FL 32960	VERO BEACH FL 32960

## Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90039 034 \*\*\*150.00

}	RIVER FLOORING, INC.			•			
Principal Place	o of Rusiness	Mailing Address			( 1005)000) ILO SOLIL IBBIL BOLIL BOLIL BOLIL BOLIL	I BIRLA BRITA BARRA	
·		1171 COMMERCE AVE.					
1171 COMMERC VERO BEACH F		VERO BEACH FL 32960					
Vene denoi.					DO NOT WRITE IN THIS	SSPACE	
					3. Date Incorporated or Qualifed		
					06/25/1997		
2. Principal Pl	lace of Business	2a. Mailing Address			4. FEI Number		plied For
21		26			65-0778921		ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75	Additional   equired
22		27		<del> </del>			
City & State	e —	City & State			6. Election Campaign Financing	** \$5.00 Added 1	- ;
23		28	0		Trust Fund Contribution		io rees
Zip	Country	Zip	Count	ry	8. This corporation owes the current year Ir	itangible	
24	25	29 3	101		Personal Property Tax.  10. Name and Address of New Registered		
	9. Name and Address of Curre	ent Registered Agent	-	1 Name	IV. Haine and Address of them Negistered		
MCH	IUGH, JOHN J JR.		["				
	17TH ST., SUITE U	•	8	2 Street A	ddress (P.O. Box Number is Not Acceptable)		ł
	O BEACH FL 32960		8	,			
VERN	O BEACH I E. 32500		l°	3			
			8	4 City	FI	85 Zip	Code
							registered
i office or re	valetored agent or both in the Stat	te of Fiorida. Such change was aut	nonzea c	iv the corpor	orporation submits this statement for the purpose cration's board of directors. I hereby accept the appor	intment as re	gistered
agent. I a	m familiar with, and accept the obli	gations of, Section 607.0505, Florio	da Statute	5.	, , , , , , , , , , , , , , , , , , , ,		
SIGNATURE					·		Į
	Signature, typed or printed name of registered a	<u> </u>		jent signature rec	uried when reinstating) DATE	ND DIDECTO	
12.	OFFICERS A	AND DIRECTORS	13.	- 	uired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A		
	OFFICERS A	<u> </u>	13. 1.1 TITLE	-	denote interviewed.	ND DIRECTO	DRS IN 12
12.	OFFICERS A  D  BALDWIN, DONALD K	AND DIRECTORS	13. 1.1 TITLE 1.2 NAMI		denote interviewed.		
12.	OFFICERS A D BALDWIN, DONALD K 3508 13TH ST., S.W.	AND DIRECTORS	13. 1.1 TITLE 1.2 NAMI 1.3 STRE	E EET ADDRESS	denote interviewed.		
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS A  D  BALDWIN, DONALD K	AND DIRECTORS	13. 1.1 TITLE 1.2 NAMI 1.3 STRE 1.4 CITY	E EET ADDRESS -ST-ZIP	denote interviewed.	☐ Change	☐ Addition
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CITY-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, with all other like empowered.

SIGNATURE: >

REQUIRED NAME OF SIGNING OFFICER OR DIRECTOR