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 # P97000069049 (9)

R&M FLOORING COMPANY

Principal Place of Business	Mailing Address			
3808 CORTEZ DR., APT. D TAMPA FL 33614	3806 CORTEZ DR., APT. D TAMPA FL 33614			

FILED Mar 05 1998 8:00am Secretary of State



Principal Plac	e of Business		Mailing Address		7 700 770 770 770 770 770 770 770 770 7	inter anter anter daren fil		148 1811 1881	
3606 CORTEZ DR., APT. D TAMPA FL 33614			3806 CORTEZ DR., APT. D TAMPA FL 33614						
					DO N	IOT WRITE IN THIS	SPACE		
ĺ					Date Incorporated or	Qualified			
					08/08/1997				
<u> </u>	lace of Business	2	a. Mailing Address		4. FEI Number		Ar	oplied For	
21		26	i		59-3463	3168	No	ot Applicable	
Suite, Apt.	#, etc.		Suite, Apt. #, etc.		5. Certificate of Status D		\$8.75	Additional	
22		27	<u> </u>		8. Certificate of Status D	esired	Fee Re	equired	
City & State	Э		City & State		6. Election Campaign Fi	nancing	\$5.00	May Be	
23	<u> </u>	28		· · · · · · · · · · · · · · · · · · ·	Trust Fund Contribution	on 🗆	Added 1	to Fees	
Zip	Country	у	Zip	Country	B. This corporation owes	or has paid the cu			
24	25	29		30	Personal Property Tax			₹No	
	g, Name and Addre		Istered Agent		10. Name and Address of	of New Registered	Agent		
[CO	rporation service	E COMPANY		81 Name	Michael D.	Hagse		ŀ	
120	1 HAYS STREET			82 Street	Address (P.O. Box Number is Not	Acceptable)	4.		
TAL	LAHASSEE FL 32301	l·2525			806 D. Co-te	t dr			
				83					
				84 City			Teel 7:- /	0.40	
				84 City .	a maa	FL	85 Zip (Code / 1552	
11. Pursuant t	o the provisions of Sect	ions 607.0502 and	607 1508, Florida Stati	ites, the above-named	corneration submits this statemer	nt for the purpose of	d obobolna it	o registered	
office or re	egistered agent, or both m familiar with, and acc	, in the State of Flor ept the obligations	rida. Such change was of Section 607 0505. F	authorized by the corp	poration's board of directors. I her	eby accept the app	pointment as	registered	
	m.1			111			ruenn ō		
SIGNATURE .	Signature, lyped or profied name	o' registered agent and lit	the if applicable (NC	TE. Registered Agent signature	required when reinstating)	DATE	wary o	0,7775	
12.	0	FFICERS AND DIRE	CTORS	13.	ADDITIONS/CHANGES	TO OFFICERS AN	DIRECTOR	IS IN 12	
TITLE	D		☐ DELE TE	1.1 TITLE			Change	☐ Addition	
NAME	MASON, RAYMON	DJ		1.2 NAME				[:	
STREET ADDRESS	3806 CORTEZ DR.	APT. D		1,3 STREET ADDRESS					
CITY-ST-ZIP	TAMPA FL 33614			1.4 CITY - ST - ZIP				ļ	
TITLE	D		DELETE	2.1 TITLE			Change	Addition	
NAME	HAASE, MICHAEL	D		2.2 NAME				_	
STREET ADDRESS	4916 OAKSHIRE D			2 3 STREET ADDRESS					
CITY-ST-ZIP	TAMPA FL 33625-6			2. 4 CITY-ST-ZIP				1	
TITLE	17.000.71.12.000.20.0		DELETE	3.1 TITLE			Change	Addition	
NAME			<u></u>	3.2 NAME			5.40190	- riddicidii	
STREET ADDRESS				3.3 STREET ADDRESS					
CITY-ST-ZIP						•			
TITLE			DELETE	3.4. CITY - ST - ZiP 4.1 TITLE		•	Change	Addition	
NAME				1			∪iditye	□ Addition	
				4.2 NAME				i	
STREET ADDRESS				4.3 STREET ADDRESS					
CiTY-SI-ZIP			Driete	4.4 CITY-ST-ZIP		···			
TITLE			DELETE	5.1 TITLE			Change	☐ Addition	
NAME				5.2 NAME					
STREET ADDRESS				5.3 STREET ADDRESS					
CITY-ST-ZIP				5.4 CITY - ST - ZIP					
TITLE			DELETE	6.1 TITLE			☐ Change	Addition	
NAME				6.2 NAME					
STREET ADDRESS				6.3 STREET ADDRESS					
CITY - \$3 . 7(D									

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.