

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 05, 2004 8:00 am
Secretary of State

04-05-2004 90071 007 ***150.00

DOCUMENT # P98000023996

1. Entity Name

CARL'S CUSTOM FLOORING, INC.



Principal Place of Business

2953 SHORE DRIVE
B
SAFETY HARBOR FL 34695
US

Mailing Address

2953 SHORE DRIVE
B
SAFETY HARBOR FL 34695
US

940440J4



MOORE CR2E034 (11/03)

2. Principal Place of Business

714 PALM AVE.

Suite, Apt. #, etc.

3. Mailing Address

714 PALM AVE.

Suite, Apt. #, etc.

City & State

TARPON SPRINGS FL.

City & State

TARPON SPRINGS FL.

4. FEI Number

59-3499217

Applied For

Not Applicable

Zip

34689

Country

FLORIDA

Zip

34689

Country

FLORIDA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GIRON, CARL
2953 SHORE DRIVE APT B
SAFETY HARBOR FL 34695

7. Name and Address of New Registered Agent

Name

CARL GIRON

Street Address (P.O. Box Number is Not Acceptable)

714 PALM AVE

City

TARPON SPRINGS

FL

Zip Code

34689

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE P ☐ Delete
NAME GIRON, CARL
STREET ADDRESS 3924 ORCHARD HILL CIRCLE
CITY-ST-ZIP PALM HARBOR FL 34684

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P ☒ Change ☐ Addition
NAME CARL GIRON
STREET ADDRESS 714 PALM AVE
CITY-ST-ZIP TARPON SPRINGS FL. 34689

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Carl Giron

CARL GIRON

4-3-2004

(727) 939-8534

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #