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 # **P98000074645**1. Corporation Name

ADVANTAGE FLOORING, INC.

,,,										
Principal Place of Business Mailing Address							f 10041001 119 10191 10111 00111		. 18811 91918 81111 1	
1046 MINERVA AVE. SOUTH		1046 MINERVA AVE. SOUTH								
LEHIGH ACRES	LEHIGH ACRES FL 33936	.36				DO NOT W	RITE IN THIS	S SPACE		
					}	3. Dat	e Incorporated or Qualife		3 01 7102	
					ł		/26/1998	_		
2. Principal Place of Business 2a. Mailing Addre							Number		Ap	plied For
21		26				(09	5-09W279	74	No	t Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certifcate of Status Desired			\$8.75	
22		27				J. 001			Fee Re	quired
City & State		City & State					ction Campaign Financin	g 🗆	\$5.00	
23		28					st Fund Contribution		Added t	.o rees
Zip ─_	Country	h	Country		ļ		s corporation owes the cu sonal Property Tax.	ırrent year ir		No
24	25 9. Name and Address of Current	29 30			1		me and Address of Nev	Registered		
	9. Name and Address of Current	vaðistaran viðarir	81	Name		10. 112				
SHENKO, WILLIAM E JR			-		A -1 -1	- (0.0	Day Number in Not Acco	ntable)		
2801	ESTERO BLVD., SUITE C		82	Street	Adares	\$ (P.U.	Box Number is Not Acce	ptable)		
FT. N	IYERS BEACH FL 33931		83			-				
			84	City					85 Zip (Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the								FI		
agent. I ar	to the provisions of Sections of Neggistered agent, or both, in the State on familiar with, and accept the obligations of the state of registered agent.	ons of, Section 607.0505, Florida	Statutes	•		hen reinsta	ting)	DATE		
12.	OFFICERS AND		13.		_	ADD	ITIONS/CHANGES TO C	OFFICERS A		ORS IN 12 Addition
TITLE	D	_	1.1 TITLE		P				Change	
NAME	CETITOTOTI, TIOTTI E		1.2 NAME		İ					
STREET ADDRESS	1010 Miller 1117 Title 1000 Title		1.3 STREE			,				Ì
CITY-ST-ZIP			1.4 CITY-S	T-ZIP	\$115	715		<u> </u>	Change	. ☐ Addition
TITLE	D CHERAPO TODO I	_	2.1 TITLE 2.2 NAME		77	TIS			X	
NAME		712,7410, 1000 2		ADDRESS						}
STREET ADDRESS			2.4 CITY-5				7.	ip - 3	3790	ත
CITY-ST-ZIP TITLE	FUNI MITERS FL 33930	DELETE 3.1 TO		31-ZIF				<u>, </u>	Change	Addition
NAME		_	3.2 NAME							
STREET ADDRESS	33		33 STREE	TADDRESS						
CITY-ST-ZIP			3.4. CITY-5	ST-ZIP						
TITLE		☐ DELETE	4.1 TITLE						Change	Addition
NAME			4. 2 NAME							
STREET ADDRESS	DRESS 4.3		4.3 STREET ADDRESS							
CITY-ST-ZIP	444		4.4 CITY-S	T-ZIP	J					
TITLE			5.1 TITLE						Change	☐ Addition
NAME			5.2 NAME							
STREET ADDRESS			5.3 STREE	T ADDRESS						
CITY-ST-ZIP			5.4 CITY+S	T-ZIP						
TITLE		☐ DELETE	6.1 TITLE						Change	☐ Addition
NAME			6.2 NAME							

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.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

Ricky E yevington

FILED

May 06, 1999 8:00 am Secretary of State

05-06-1999 90067 028 ***150.00

CR2E034 (11/98)

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