

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000095311

Entity Name: CUSTOM FLOORING, INC.

FILED
Jan 11, 2005
Secretary of State

Current Principal Place of Business:

6901 OKEECHOBEE BLVD, STE. E-5
WEST PALM BEACH, FL 33411

New Principal Place of Business:

Current Mailing Address:

6901 OKEECHOBEE BLVD, STE. E-5
WEST PALM BEACH, FL 33411

New Mailing Address:

FEI Number: 65-0876051

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

AMERILAWYER
343 ALMERIA AVENUE
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: COHEN, RICHARD A
Address: 2825 UNIVERSITY DRIVE #300
City-St-Zip: CORAL SPRINGS, FL 33065

Title: VD () Delete
Name: LAROSA, LAWRENCE
Address: 2825 UNIVERSITY DRIVE #300
City-St-Zip: CORAL SPRINGS, FL 33065

Title: VD (X) Delete
Name: SHELLEY, ROBERT
Address: 2825 UNIVERSITY DRIVE #300
City-St-Zip: CORAL SPRINGS, FL 33065

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: COHEN, RICHARD A
Address: 6901 OKEECHOBEE BLVD
City-St-Zip: PALM BEACH, FL 33411

Title: VD (X) Change () Addition
Name: LAROSA, LAWRENCE
Address: 6901 OKEECHOBEE BLVD
City-St-Zip: PLAM BEACH, FL 33411

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RICHARD COHEN

PRES

01/11/2005

Electronic Signature of Signing Officer or Director

Date