PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

...Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000095827 1. Corporation Name

HERITAGE FLOORING SYSTEMS OF VIRGINIA, INC.

Principal Place of Business

Mailing Address

Feb 25, 1999 8:00 am Secretary of State

02-25-1999 90088 023 ***150.00



	S PARK BLVD. UNIT 7	11251 BUSINESS PARK BLVD	. UNIT 7	
JACKSONVILLE	FL 32808	JACKSONVILLE FL 32808		DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualifed
				11/13/1998
2. Principal P	lace of Business	2a. Mailing Address	TAA	4. FEI Number Applied For
116204	1A Grace Ave	26 418 S.M	KITANI	65-0814851 Not Applicable
Suite, Apt.		Suite, Apt. #, etc.		-5- Certificate of Status Desired \$8.75 Additional
22		27		Fee Required
City & State	mronia VA	City & State	Beach F	6. Election Campaign Financing S5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year Intangible
す タネー	310 25 USA	29 33442 30	usa	Personal Property Tax.
Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent				
81 Name T CHARLES P A				
CHAMBERLAND, MARC J				ddress (P.O. Box Number is Not Acceptable)
410 SOUTH MILITARE TRAIL				Berten Ben
DEERFIELD BEACH FL 33442			83 410	C M . Takir
			84 Cityo	Deerisco - 85 Zip Code
				Deen 1-12-10 FL 85 Zip Code 33742
A D				
office or registered agent, or both, in the State of Florida Statutes, the above-hance corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 607.0505, Florida Statutes.				
Offignature, typed or printed name of registered agent and it policiable. (NOTE: Registered Agent signature required when reinstalling)				
12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	☐ DELETE	1.1 TITLE	P 5 Change DAddition
NAME	CHAMBERLAND, MARC J		1.2 NAME	MARC CHAMBERLAND
STREET ADDRESS	1112 WESTON ROAD SUITE 22	1	1.3 STREET ADDRESS	4/8 5. MILITARY MAL
CITY-ST-ZIP	FORT LAUDERDALE FL 33326		1.4 CITY-ST-ZIP	1/8 5. MILITARY Trail Deensiers Beach FC 33442 UP - Change DAddition
TITLE	-	☐ DELETE	2.1 TITLE (- Change Addition
NAME			2.2 NAME	Kenneth Henrie
STREET ADDRESS			2.3 STREET ADDRESS	4185, 4161 1-12
CITY-ST-ZIP	_		2.4 CITY-ST-ZIP	Change Deddition Change Deddition Change Deddition Change Deddition Change Deddition Change Deddition
TITLE		☐ DELETE		UP ☐ Change ☐ Affidition
NAME			3.2 NAME	62044 Gravec Avenue
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP			3.4. CITY-ST-ZIP	Acexanoria UA 223/0 Change Addition
TITLE		☐ D€LETE	4.1 TITLE	Change Addition
NAME			4. 2 NAME	·
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			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	61 TMLE	☐ Change ☐ Addition
NAME			62 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
			_	

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