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 # P98000097279 1. Corporation Name

ANDRE'S FLOORING, INC.

FILED Apr 26, 1999 8:00 am Secretary of State 04-26-1999 90197 040 ***150.00



Principal Place	e of Business	Mailing Address				
2839 TAYLOR STREET		2839 TAYLOR STREET				
SUITE 8 HOLLYWOOD FL 33020		SUITE 8		DO NOT WRITE IN THIS SPACE		
HOLLIWOOD F	L 33020	HOLLYWOOD FL 33020		3. Date Ir corporated or Qualifed	JI AUL	
				11/19/1998		
2. Principa Pi	lace of Business	2a. Mailing Address		4. FEI Number 877864	_ 	lied For
21				65-0877867		Applicable
Suite, Abt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 A	
City & State	е	City & State		6. Election Campaign Financing	\$5.00 N	lay Be
23		28		Trust Fund Contribution	Added to	Fees
Zip	Cour try	Zip	Country	8. This corporation owes the current year Inta		_
24	25	29	30	1 Staditary topology turn		No
	9. Name and Address	of Current Registered Agent		10. Name and Address of New Registered A	gent	
4145	TOU ANAMED		81 Name			
•	RILAWYER		82 Street Acd	dress (P.O. Box Number is Not Acceptable)		
343 ALMERIA AVENUE CORAL GABLES FL 33134						
LOH	IAL GABLES PL 33134		83			
1			84 City		85 Zip C	nde
	_			<u> </u>		
11. Pursuant	to the provisions of Sections	s 607.0502 and 607.1508, Florida Stat	utes, the above-named corporation	poration submits this statement for the purpose of cion's board of cirectors. I hereby accept the appoin	hanging its r	egistered estered
agent. a	m familiar with, and accept t	the obligations of, Section 607.0505, F	lorida Statutes.	toris board of Circolors, Friendly descript and appear	anone do rog	
SIGNATURE						
	Signature, typed or printed na ne of re	*	T :: Registered Agent signature require			0.01.40
12.		CERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND	☐ Change	Addition
TITLE	PSTD	☐ DELETE	1.1 TITLE		Citalige	
NAME	HOULE, ANDRE	•	1.2 NAME			
STREET ADDRESS	2839 TAYLOR STREET		1.3 STREET ADDRESS			
CITY-ST-ZIP	HOLLYWOOD FL 3302		1.4 CITY-ST-ZIP		Change	Addition
TITLE		☐ DELETE	2.1 TITLE		Change	
NAME	Į.		2.2 NAME			
STREET ADDRESS			2.3 STREET ADDRESS			
CITY-ST-ZIP			2. 4 CITY-ST-ZIP			- I Addres
TITLE		☐ DELETE	3.1 TITLE		Change	Addition
NAME.			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			j
CITY-ST-ZIP			3.4. CITY-ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE		☐ Change	
NAME			4. 2 NAME			Addition
STREET ADDRESS			4.3 STREET ADDRESS			Addition
CITY-ST-ZIP			7.0 0 11 (22 / 7 (20)			Addition
			4.4 CITY-ST-ZIP			
TITLE		☐ DELETE			Change	Addition
TITLE NAME		☐ DELETE	4.4 CITY- ST- ZIP		Change	
		☐ DELETE	4.4 CITY- ST- ZIP 5.1 TITLE		Change	
NAME		DELETE	4.4 CITY- \$T- ZIP 5.1 TITLE 5.2 NAME		Change	

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.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

NAME

STREET ADDRESS

CITY-ST-ZIP