## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## Mar 14, 2005 08:00 AM Secretary of State DOCUMENT # P98000097451 1. Entity Name ALPINE WOOD FLOORS, INC. Principal Place of Business Mailing Address 1395 EAST OAKLAND PARK BLVD 42 S.W. 34TH AVENUE OAKLAND PARK, FL 33308 MIAMI, FL 33315 01052005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0881482 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent HUSSMAN GUNTHER, HAROLD DO NOT WRITE 1395 EAST OAKLAND PARK BLVD OAKLAND PARK, FL 33308 IN THIS SPACE 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 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2005 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. IIILE PD HUSSMAN GUNTHER, HAROLD MANUE STREET ADDRESS 1395 EAST OAKLAND PARK BLVD CITY - ST - ZIP OAKLAND PARK, FL 33308 U00000262153 03/14/05-80040-024 150.00 TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP

12. I hereby certify that the information supplied with this filling 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 ceth; 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.

HARBOLL HUSSMANN

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: ∠

PRESIDENT

**FILED** 

03/03/05 (954) 565-5907