

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000058830

FILED
Apr 30, 2004
Secretary of State

Entity Name: ED & BEEZ FLOORCOVERING & HOMECENTER, INC.

Current Principal Place of Business:

5700 N W 7TH AVENUE
MIAMI, FL 33127

New Principal Place of Business:

2725 N W 210TH TERRACE
MIAMI, FL 33056

Current Mailing Address:

5700 N W 7TH AVENUE
MIAMI, FL 33127

New Mailing Address:

2725 N W 210TH TERRACE
MIAMI, FL 33056

FEI Number: 65-0930866

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GOLDEN, THERESA A
1831 N W 154TH STREET
MIAMI, FL 33054 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: PD () Delete
Name: MAYES, ED
Address: 5700 N W 7TH AVENUE
City-St-Zip: MIAMI, FL 33127

Title: VPD () Delete
Name: GOLDEN, THERESA A
Address: 1831 N W 154TH STREET
City-St-Zip: OPA LOCKA, FL 33054

Title: VPD () Delete
Name: MAYES, IDELLA B
Address: 5700 N W 7TH AVENUE
City-St-Zip: MIAMI, FL 33127

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MAYES, ED
Address: 2725 N W 210TH TERRACE
City-St-Zip: MIAMI, FL 33056

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

Title: VPD (X) Change () Addition
Name: MAYES, IDELLA B
Address: 2725 N W 210TH TERRACE
City-St-Zip: MIAMI, FL 33056

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: THERESA A. GOLDEN

VPD

04/30/2004

Electronic Signature of Signing Officer or Director

Date