

2001 UNIFORM BUSINESS REPORT (UBR)

5/1

FILED
May 31, 2001 8:00 am
Secretary of State

05-01-2001 90081 014 ***150.00

DOCUMENT # P99000067575

1. Entity Name

THE FLOORING TEAM, INC.

Principal Place of Business

Mailing Address

9130 S. DADELAND BLVD. #1225
 MIAMI FL 33156

9130 S. DADELAND BLVD. #1225
 MIAMI FL 33156

2. Principal Place of Business

3. Mailing Address

1829 SW 31 AVE

1829 SW 31 AVE

Suite, Apt. #, etc.
 BLDG Q Bay 6

Suite, Apt. #, etc.
 BLDG Q Bay 6

City & State
 Pembroke Park FL 33009

City & State
 Pembroke Park, FL

Zip
 33009

Zip
 33009

Country
 USA

Country
 USA



DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0941864

Applied For
 Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FILINGS, INC.
 3732 N.W. 18TH STREET
 FT. LAUDERDALE FL 33311-4132

Name Markowitz, DAVIS, RINGEL & TRINITY
 Street Address (P.O. Box Number is Not Acceptable)
 9130 S. DADELAND BLVD
 Suite #1225
 City Miami FL Zip Code 33156

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.

SIGNATURE Filings, Inc. Gary M. Markowitz

4/25/01

Signature, typed or printed name of registered agent and title, if applicable (NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GERSON, HARY 9130 S. DADELAND BLVD. #1225 MIAMI FL 33156	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MARKOWITZ, GREGG 9130 S. DADELAND BLVD. #1225 MIAMI FL 33156	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GERSON, GARY 1829 SW 31 AVE BLDG Q Bay 6 Pembroke Park, FL 33009	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Markowitz, Gregg 1829 SW 31 AVE BLDG Q Bay 6 Pembroke Park, FL 33009	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like entities, etc.

SIGNATURE

GARY GERSON
 SIGNATURE AND TYPED OR PRINTED NAME OF AGENT OR DIRECTOR

4/25/01 (954) 987-5800
 Date Daytime Phone #

CR2E034 (10/00)