

5/15/

FILED

Aug 10, 2001 8:00 am  
Secretary of State

05-15-2001 90018 036 \*\*\*150.00

## 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000080965

1. Entity Name

WORKHORSE FLOORING, INC.

Principal Place of Business

137 E WOOLBRIGHT AVE. SUITE 150  
BOYNTON BEACH FL 33435

Mailing Address

137 E WOOLBRIGHT AVE. SUITE 150  
BOYNTON BEACH FL 33435

2. Principal Place of Business

1500 S.W. 30<sup>th</sup> Ave

3. Mailing Address

1500 S.W. 30<sup>th</sup> Ave

Suite, Apt. #, etc.

# 6

Suite, Apt. #, etc.

# 6

City &amp; State

Boynton Beach, FL

City &amp; State

Boynton Beach, FL

4. FEI Number

APPLIED FOR

65-0659179

Applied For

Not Applicable

Zip

33426

Country

USA

Zip

33426

Country

USA

5. Certificate of Status Desired ☐\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

MARTIN, PHILIP  
137 E WOOLBRIGHT AVE, SUITE 150  
BOYNTON BEACH FL 33435

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

1500 SW 30<sup>th</sup> Ave

# 6

City

Boynton Beach

FL

Zip Code

33426

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

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 State10. Election Campaign Financing  
Trust Fund Contribution. ☐\$5.00 May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE D  
NAME MARTIN, PHILIP  
STREET ADDRESS 137 E WOOLBRIGHT AVE, SUITE 150  
CITY-ST-ZIP BOYNTON BEACH FL 33435 ☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME 1500 SW 30<sup>th</sup> Ave #6 ☒ Change ☐ Addition  
STREET ADDRESS  
CITY-ST-ZIP Boynton Beach, FL 33426TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE  
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 empowered.

SIGNATURE: Philip B Martin

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/01 561-738-0383

Date

Daytime Phone #

CR2E034 (10/00)

FEI # 65-0659179

Attachment Doc #



P99000080965

77386

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

May 23, 2001

WORKHORSE FLOORING, INC.  
1500 SOUTHWEST 30TH AVENUE #6  
BOYNTON BEACH, FL 33426

Subject: **WORKHORSE FLOORING, INC.**

Reference Number: **P99000080965**

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report has not been filed and a copy is being returned for the following correction(s):

Because our records reflect the above referenced entity previously applied for its Federal Employer Identification (FEI) Number, it must now include its FEI number on the annual report/uniform business report or attach a photocopy of the FEI number application to the document before we can complete your filing.

**TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.**

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 488-9000.

/AS

ANNUAL REPORTS SECTION