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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S07515

MALONEY'S FLOORING, INC.

(7)

FILED Apr 16 1997 8:00am Secretary of State

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Principal Place of Business		Mailing Address	Mailing Address			- T LOODINGIO VIE BRANT FOODE DITAL STORE WITH BIRNE DIRIN DIDAT DIRIN DEDIT DIRIN DIRIN DIRIN DIRIN DIRIN DIR			
7910 ALHAMBE		7310 ALHAMBRA BLVD.							
MIRAMAR FL 3	3023	MIRAMAR FL 33023-5912	MIRAMAR FL 33023-5912						
						2 Data Incorporated or Qualified	0 - Do	to of loos	Danast
f 1						 Date Incorporated or Qualified 04/05/1990 		ite of Last)5/1996	Heport
2. Principal P	28. Mailing Address	ailing Address			4. FEI Number		Applied For		
21			26		65-0220063			Vot Applicable	
Suite, Apt	#, etc.	F	Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional			
22 City & Stat			27						Required
City & Stat	e	City & State			6. Election Campaign Financing \$5.00 May Be				
	Country	28				Trust Fund Contribution			d to Fees
Zip 24	<u>}</u> ·	Zip	Country			8. This corporation has hability for intangible tax under s. 199.0 Florida Statutes			
[<u>K</u> 4]	9, Name and Address of Curren	29 Registered Agent	30		-	Florida Statutes 10. Name and Address of New Reg		_	
MAI	ONEY, THOMAS R	t trogratored Agont		B1	Name	(U, Haine and Address of Hell Ne	11010100 /	Ahour	
) ALHAMBRA BLVD.		Į						
	MAR FL 33023		[82	Street Ac	ldress (P.O. Box Number is Not Acceptab	le)		
МІГИ	MMAN FL 33023		1	83					
				•					
				84	City,		FL	85 Zip	Code
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statul	os, the ab	ove	-named co	orporation submits this statement for the p	urnose of	changing	its registered
office or i	registered agent, or both, in the State im familiar with, and accept the obliga	of Florida. Such change was tions of Section 607 0505. Ft	authorizec oricia Stati	t by ites	the corpor	ration's board of directors. I hereby accep	t the appo	ointment a	s registered
SIGNATURE	·		one oran						
BIGINATURE	Signature, typed or printed name of registered agor	(NOT	f : Rogistered	Age	it signature rec	quired when reinstating)	DATE		
12.	OFFICERS AND	DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRECTO	RS IN 12
TITLE	P	☐ DELETE	1.1 10	l F	ļ			Change	Addition
MALONEY, THOMAS R			1.2 NAME		<u> </u>				
STREET ADDRESS 7310 ALHAMBRA BLVD.			1.3 STREET ADDRESS		ADDRESS				
CITY-ST-ZIP	MIRAMAR FL 33023		1.4 CIT	Y-\$1	- ZIP				
TITLE	-	☐ DELETE	2.1 TITLE					Change	Addition
NAME			2.2 NA	ME					
STREET ADDRESS			2.3 \$16	REET A	ADDRESS				
QITY-ST-ZIP			2. 4 CI	1Y - S	1-202				
TITLE			3.1 TITLE					Change	Addition
NAME			3.2 NAI	ME					
STREET ADDRESS			3.3 STF	REETA	ADDRESS				
OTY-ST-ZIP	•		3.4, CI3	[Y-S]	1 - 7IP				
TITLE		☐ DELETE	4.1 111					Change	☐ Addition
NAME			4. 2 NA	ME					ļ
STREET ADDRESS			4.3 \$16	REET A	ADDRESS				1
CITY-ST-ZIP			4.4 CIT						<u> </u>
TITLE	4,4	DELETE	5.1 1111	_				Change	Addition
NAME			5.2 NA					,	
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP			5.4 CIT						
TITLE		DELETE	6.1 T(T)					Change	Addition
NAME								onling(- Hadibari
177			6.2 NAN						
STREET ADDRESS			0.3 5 ! H	CC F	ADDRESS				

I do 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 chapaed, or on an attachment with an address.

6.4 CITY - ST - ZIP

Thomas R. Malony