FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # V00845

(0)

CUSTOM FLOORING & DESIGN, INC.

FILED Jan 24 1997 8:00am Secretary of State



Principal Place of Business Mailing Address 9729 BEACH BLVD JACKSONVILLE FL 32246 US Mailing Address 9729 BEACH BLVD JACKSONVILLE FL 32246-4701 US									
·						3. Date Incorporated of 01/01/1992	or Qualified 3a.	Date of Last R 03/08/1996	•
2. Principal f	Place of Business	2a. Mailing	Address			4. FEI Number		Ar	plied For
21		26		· · · · · · · · · · · · · · · · · · ·		59-3100350			t Applicable
Suite, Apt		27	pt. #, etc		•	5. Certificate of Status	Desired	\$8.75 Fee Re	
City & Sta	ite	City & S	tate			6. Election Campaign			May Be
23	Charles and the same of the sa	28	······································	Counts		Trust Fund Contribu			to Fees
manana ' karanana ' karanana a			7ip Country 30			This corporation has liability for intangible tax under s. 199.032, Florida Statutes X Yes			
24	25 29 9. Name and Address of Current Registered Age			30		Florida Statutes Yes I No 10. Name and Address of New Registered Agent			
R	AULT, JAMES L	one negrateros reg		81	Name	10. 1111110 0110 700100	5 01 110W 110W.51CI	oo Agont	
	D83 SPRING PARK CIRCLE				<u> </u>	· · · · · · · · · · · · · · · · · · ·			
JACKSONVILLE FL 32207						Address (P.O. Box Number is N	Not Acceptable)		
				83	ļ				
ı				84	City			85 Zip	Code
11 Pursuant	t to the provisions of Sections 607 05	502 and 607 1508	Florida Statuter	s the abov	e-named	corporation cultmits this staten			e registered
SIGNATURE		ujont and the Happicable ND DIRECTORS	Pres	Registered Ag	ent signature	required when reinstating) ADDITIONS/CHANG	DAT		RS IN 12
TITLE	STD		DELETE	1.1 TITLE			•	Change	Addition
NAMÉ	MEAD, ROBERT			1.2 NAME					
STREET ADDRESS				1.3 STREE	ADDRESS				
CITY S1-ZIF	JACKSONVILLE FL			1.4 CITY - S	T-ZIP				T
TITLE	COLBURN, JESSIE	Ļ	DELETE	2.1 TITLE	ļ	6	_	Change	Addition
NAME	4000 CODING DADY GOOD	E		2.2 NAME		Janes Boult	- م ار ۲۰ ما		
STREET ADDRESS	JACKSONVILLE FL	L		23 STREE		40.83 Spring	TONK WIFE	16	
CITY - ST - ZIP TITLE	V		DELETE	2. 4 CITY - 3.1 TITLE	SI - ZIP	Jax Fl 3	2208	Change	Addition
NAME	MEAD, ROBERT	L		3.2 NAME	• 1	Josep Calbur	^^	C.A. Ontange	/localion
STREET ADDRESS	4704 N. ODLANDO CIDOLE				ADDRESS	Jesse Calbur 10960 Beau	h Blud #	159	
CITY - ST - 7IP	JACKSONVILLE FL			3.4. CITY-		Jax FL 3	22 YE		
Tille			DELETE	4.1 TITLE	O1 E11	VAN I C SI		☐ Change	Addition
NAME				4 2 NAME				•	
STREET ADDRESS					ADDRESS				
CITY - ST - ZIP				44 CITY-5					
THILE			DELETE	51 TITLE		1		Change	Addition
NAME				52 NAME					
STREET ADDRESS				T OTDER	LODOFOR				
CITY - ST - Z-P				5.3 STREE	WDDME22				
				5 4 CHY-1					
T:TLF		[DELETE					☐ Change	Addition
			DELETE	5 4 CHY-				Change	Addition
T:TLF		1	DELETE	5.4 CHY-1 6.1 TITLE 6.2 NAME				Change	Addition

recovereby 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 eath; 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 13 of changed, or on an attachment with an address.

SIGNATURE: