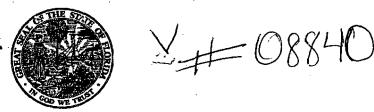
2001 UNIFORM BUSINESS REPORT (UBR)

Feb 28, 2001 8:00 am **DOCUMENT # V08840 Secretary of State** 1. Entity Name 02-28-2001 90032 008 ***150 00 FLORIDA HARDWOOD FLOOR SUPPLY, INC. Principal Place of Business Mailing Address 8506 SUNSTATE ST 8506 SUNSTATE ST TAMPA FL 33834 TAMPA FL 33634 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-3114966 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BAST, MARGARET DIANE Street Address (P.O. Box Number is Not Acceptable) 8506 SUNSTATE ST TAMPA FL 33834 City Zip Code 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 9. This corporation is eligible to satisfy its Intangible 10-Election Gampaign Financing \$5:00 May BA Tax filing requirement and olucia to do so. Trust Fund Contribution. Added to Fees (See criteria on back) . Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. TITL F TITLE ☐ Delete Change ☐ Addition BAST, MARGARET DIANE NAME NAME STREET ADDRESS STREET ADDRESS 195 SPRING LAKE HWY CUTY-ST-ZIP **BROOKSVILLE FL 34602** CITY-ST-ZIP Addition TITLE Change TILE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition Delete Change TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition Delete TITLE ... TIME: NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition Colete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition TITLE ☐ Delete TITLE NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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. changed, or on an attachmen



FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State

February 2, 2001

FLORIDA HARDWOOD FLOOR SUPPLY, INC. 8506 SUNSTATE ST TAMPA, FL 33634 US

Subject: FLORIDA HARDWOOD FLOOR SUPPLY, INC.

Reference

V08840

Number:

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

Please sign and return your check submitted with the annual report/uniform business report.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

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

/rr ANNUAL REPORTS SECTION

ONLY SERVICE

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