## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # V35899 1. Entity Name TOTAL FLOORS PLUS, INC. Principal Place of Business 516 N.W. 28TH COURT WILTON MANORS, FL 33311 DO NOT WRITE IN THIS SPACE 6. Name and Address of Current Registered Agent Jan 30, 2 Secret 1. Entity Name Secret Matiling Address Matiling Address 516 N.W. 28TH COURT WILTON MANORS, FL 33311 01222004 No Chg-P 4. FEI Number 65-0340631 5. Certificate of Status Desire

FILED Jan 30, 2004 08:00 AM Secretary of State

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CR2E034 (10/03)

Applied For

			65-0340631 Not Applicable				
				5. Certificate	of Status Desired	\$8.75 Additional Fee Required	
	6. Name and Address of Current Regis	tered Agent				hag all	
BINDEWALD, WILLIAM J. 516 N.W. 28TH COURT WILTON MANORS, FL 33311			DO NOT WRITE IN THIS SPACE				
8. The above the obligat	named entity submits this statement for the plices of registered agent.	ourpose of changing its registered	office or re	gistered agent, or bo	th, in the State of Florida. I a	m lamiliar with, and accept	
				required when reinstading)	DATE		
	E NOWII! FEE IS \$150.00 ay 1, 2004 Fee will be \$550.00	Election Campaign Financi     Trust Fund Contribution.	ng 🗆	\$5.00 May Be Added to Fees	U0000002355 02/02/04-80030	1 -010 150.00	
10.	OFFICERS AND DIRECTORS				, , , , , , , , , , , , , , , , , , , ,		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BINDEWALD, WILLIAM J. 516 NW 28TH CT WILTON MANORS, FL						
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<del>-</del> -		•	DO	NOT WRIT	E	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN THIS SPACE				
TITLE NAME STREET ADDRESS CITY-ST-ZIP			•		· · · · · · · · · · · · · · · · · · ·		
TITLE		ł					

12. If hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

B 11/11 2000