2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000105176

Entity Name: SIGNATURE FLOORING BY SINC.

FILED Feb 07, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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1100 NORTH FL MANGO RD STE F

WEST PALM BEACH, FL 33409

Current Mailing Address: New Mailing Address:

10186 MIKADO LN 5812 NW BURRI CT.

ROYAL PALM BCH, FL 33411 PORT ST. LUCIE, FL 33986

FEI Number: 65-1155092 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

AHMET, ONGEL MATT (AHMET), ONGEL 10188 MIKADO LN 5812 NW BURRI CT.

WEST PALM BEACH, FL 33411 US PORT ST. LUCIE, FL 34986 US

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: MATT (AHMET) ONGEL 02/07/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST () Delete Title: PST (X) Change () Addition

 Name:
 ONGEL, AHMET
 Name:
 ONGEL, MATT (AHMET)

 Address:
 10186 MIKADO LN
 Address:
 5812 NW BURRI CT.

 City-St-Zip:
 ROYAL PALM BCH, FL 33411
 City-St-Zip:
 PORT ST. LUCIE, FL 34986

Title: () Delete Title: VP () Change (X) Addition

Name: OZCAN, ONGEL

Address: Address: 1400 VILLAGE BLVD APT#1201

City-St-Zip: City-St-Zip: WEST PALM BEACH, FL 33409

Title: SEC () Change (X) Addition

 Name:
 Name:
 KIRSTEN, ONGEL

 Address:
 Address:
 5812 NW BURRI CT.

 City-St-Zip:
 City-St-Zip:
 PORT ST. LUCIE, FL 34986

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MATT (AHMET) ONGEL PST 02/07/2006