

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000058413

Entity Name: OBELLIS WOOD FLOORS, INC.

FILED
Apr 17, 2008
Secretary of State

Current Principal Place of Business:

6645 NW 38TH TER.
VIRGINIA GARDENS, FL 33166

Current Mailing Address:

6645 NW 38TH TER.
VIRGINIA GARDENS, FL 33166

New Principal Place of Business:

190 WESTWARD DR
STE D
MIAMI SPRINGS, FL 33166

New Mailing Address:

190 WESTWARD DR
STE D
MIAMI SPRINGS, FL 33166

FEI Number: 13-4253463

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GONZALEZ, LAZARO W
6645 NW 38TH TER.
VIRGINIA GARDENS, FL 33166 US

Name and Address of New Registered Agent:

ALL FLORIDA FIRM INC
813 DELTONA BLVD
STE A
DELTONA, FL 32725 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: SHANNON DUNN FOR ALL FLORIDA FIRM INC

04/17/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GONZALEZ, LAZARO W
Address: 6645 NW 38TH TER.
City-St-Zip: VIRGINIA GARDENS, FL 33166

Title: VPD () Delete
Name: GONZALEZ, KYRENE E
Address: 6645 NW 38TH TERR
City-St-Zip: VIRGINIA GARDENS, FL 33166

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GONZALEZ, LAZARO W
Address: 190 WESTWARD DR STE D
City-St-Zip: MIAMI SPRINGS, FL 33166

Title: VP (X) Change () Addition
Name: GONZALEZ, KYRENE E
Address: 190 WESTWARD DR STE D
City-St-Zip: MIAMI SPRINGS, FL 33166

I hereby certify that the information supplied with this filing does not qualify 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: SHANNON DUNN FOR LAZARO GONZALEZ

RA

04/17/2008

Electronic Signature of Signing Officer or Director

Date