

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000075771

FILED
May 22, 2007
Secretary of State

Entity Name: ALPHA FLOORING SERVICES, INC

Current Principal Place of Business:

11001 ST AUGUSTINE RD
411
JACKSONVILLE, FL 32257 US

Current Mailing Address:

11001 ST AUGUSTINE RD
411
JACKSONVILLE, FL 32257 US

FEI Number: 20-2898676

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

New Principal Place of Business:

3900 OLDFIELD CROSSING DR
1305
JACKSONVILLE, FL 32223 US

New Mailing Address:

3900 OLDFIELD CROSSING DR
1305
JACKSONVILLE, FL 32223 US

Name and Address of Current Registered Agent:

SOUZA, NEILSON F
11011 ST AUGUSTINE RD
411
JACKSONVILLE, FL 32257 US

Name and Address of New Registered Agent:

SOUZA, NEILSON F
3900 OLDFIELD CROSSING DR
1305
JACKSONVILLE, FL 32257 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: NEILSON F SOUZA

05/22/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PVP () Delete
Name: SOUZA, NEILSON F
Address: 11001 ST AUGUSTINE RD 411
City-St-Zip: JACKSONVILLE, FL 32257 US

Title: S (X) Delete
Name: MARTINS, ELIEZER M
Address: 11001 ST AUGUSTINE RD 411
City-St-Zip: JACKSONVILLE, FL 32257 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVP (X) Change () Addition
Name: SOUZA, NEILSON F
Address: 3900 OLDFIELD CROSSING DR
City-St-Zip: JACKSONVILLE, FL 32223 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: NEILSON F SOUZA

P

05/22/2007

Electronic Signature of Signing Officer or Director

Date