## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000162628

Entity Name: NEVADA FLOORING, INC

FILED Mar 03, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4740 WALDEN CIR 4413 S KIRKMAN RD

APT 1021 APT 107

ORLANDO, FL 32811 US ORLANDO, FL 32811 US

Current Mailing Address: New Mailing Address:

4740 WALDEN CIR 4413 S KIRKMAN RD
APT 1021 APT 107
ORLANDO, FL 32811 ORLANDO, FL 32811

FEI Number: 20-3936752 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:

LEITE, ISAC EDUARDO ACCOUNT BOOKKEEPING CORP 4740 WALDEN CIR 5950 LAKEHURST DR APT 1021 STE 246

ORLANDO, FL 32811 US ORLANDO, FL 32819 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: JOYCE NASCIMENTO 03/03/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 LEITE, ISAC EDUARDO
 Name:
 LEITE, AGENOR

 Address:
 4740 WALDEN CIR APT. 1021
 Address:
 4413 S KIRKMAN RD #107

City-St-Zip: ORLANDO, FL 32811 City-St-Zip: ORLANDO, FL 32811 US

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

 Name:
 LEITE, AGENOR
 Name:

 Address:
 4740 WALDEN CIR APT. 1021
 Address:

 City-St-Zip:
 ORLANDO, FL 32811
 City-St-Zip:

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: AGENOR LEITE P 03/03/2006