

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000014743

FILED  
Apr 28, 2006  
Secretary of State

Entity Name: STYLE FLOOR, INC

## Current Principal Place of Business:

2558 ROBERT TRENT JONES DR  
1427  
ORLANDO, FL 32835 US

## New Principal Place of Business:

1428 BROOK HOLLOW DR  
ORLANDO, FL 32824 US

## Current Mailing Address:

2558 ROBERT TRENT JONES DR  
1427  
ORLANDO, FL 32835 US

## New Mailing Address:

1428 BROOK HOLLOW DR  
ORLANDO, FL 32824 US

FEI Number: 20-2240585

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LARSON, CAROLINE  
5950 LAKEHURST DR  
246  
ORLANDO, FL 32819 US

## Name and Address of New Registered Agent:

LARSON, CAROLINE  
8818 COMMODITY CIR  
40  
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: CAROLINE LARSON

04/28/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: MENEZES, GILVAN F  
Address: 2558 ROBERT TRENT JONES DR 1427  
City-St-Zip: ORLANDO, FL 32835 US

Title: VP ( ) Delete  
Name: MENEZES, SOLANGE R B  
Address: 2558 ROBERT TRENT JONES DR 1427  
City-St-Zip: ORLANDO, FL 32835 US

Title: T ( ) Delete  
Name: RODRIGUES, ALEXANDRE  
Address: 2558 ROBERT TRENT JONES DR 1427  
City-St-Zip: ORLANDO, FL 32835 US

Title: S (X) Delete  
Name: PINTO, ALAERCIO A  
Address: 4620 CASON COVE DR 706  
City-St-Zip: ORLANDO, FL 32811 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: MENEZES, GILVAN F  
Address: 1428 BROOK HOLLOW DR  
City-St-Zip: ORLANDO, FL 32824 US

Title: T (X) Change ( ) Addition  
Name: MENEZES, SOLANGE R B  
Address: 1428 BROOK HOLLOW DR  
City-St-Zip: ORLANDO, FL 32824 US

Title: VP (X) Change ( ) Addition  
Name: GABRIEL, ANA PAULA  
Address: 11849 HULLBRIDGE CT  
City-St-Zip: ORLANDO, FL 32837 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: GILVAN MENEZES

P

04/28/2006

Electronic Signature of Signing Officer or Director

Date