2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000014743

Entity Name: STYLE FLOOR, INC

Name:

Address:

City-St-Zip:

GABRIEL, ANA PAULA

11849 HULLBRIDGE CT

ORLANDO, FL 32837 US

FILED Jan 15, 2008 Secretary of State

Current P	rincipal Pla	ce of Business:	New Princ	New Principal Place of Business:		
	OK HOLLO\), FL 32824					
Current Mailing Address:			New Maili	New Mailing Address:		
	OK HOLLO\), FL 32824					
FEI Number:	: 20-2240585	FEI Number Applied For ()	FEI Number Not Appl	icable () Certificate of Status Desired ()		
Name and	l Address o	f Current Registered Agent	:: Name and	Name and Address of New Registered Agent:		
	ACCOUNTIN IMODITY CII	NG & CONSULTING SVCS L R	LC			
), FL 32819	US				
	named enti e of Florida.	ty submits this statement for t	the purpose of changing it	ts registered office or registered agent, or both,		
SIGNATUR	RE:					
	Electi	ronic Signature of Registered	Agent	Date		
Election Car	npaign Financ	cing Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	MENEZES, 0 1428 BROO	()Delete GILVAN F K HOLLOW DR FL 32824 US	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	1428 BROO	() Delete SOLANGE R B K HOLLOW DR FL 32824 US	Title: Name: Address: City-St-Zip:	VP (X) Change () Addition GABRIEL, ANA PAULA 11849 HULLBRIDGE CT ORLANDO, FL 32837 UA		
Title:	VP	(X) Delete	Title:	() Change () Addition		

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.

Name:

Address:

City-St-Zip:

SIGNATURE: GILVAN F MENEZES P 01/15/2008