

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H96622

FILED  
Apr 24, 2006  
Secretary of State

Entity Name: EQUIFLOR CORPORATION

## Current Principal Place of Business:

4405 NW 97 AVE  
MIAMI, FL 33178

## New Principal Place of Business:

## Current Mailing Address:

C/O NICOLAS TRUJILLO  
4405 NW 97 AVE  
MIAMI, FL 33178

## New Mailing Address:

C/O AERLIM DIAZ  
4405 NW 97 AVE  
MIAMI, FL 33178

FEI Number: 59-2703775

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

TRUJILLO, NICOLAS F  
4405 NW 97TH AVENUE  
MIAMI, FL 33178 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: VD ( ) Delete  
Name: GIORGINI, VICTOR R  
Address: 4405 NW 97 AVE  
City-St-Zip: MIAMI, FL 33178

Title: D ( ) Delete  
Name: SARANDES, ANTHONY  
Address: 2120 SW 55 STREET ROAD  
City-St-Zip: OCALA, FL 34474

Title: D ( ) Delete  
Name: SCHMIDT, JAMES M  
Address: 1 GROVE ISLE DR., SUITE 1202  
City-St-Zip: COCONUT GROVE, FL 33133

Title: VD ( ) Delete  
Name: MARRERO, RAUL  
Address: 4405 N.W. 97TH AVE.  
City-St-Zip: MIAMI, FL

Title: D ( ) Delete  
Name: SHULZ, PETER  
Address: 801 PINE CREEK LANE  
City-St-Zip: NAPLES, FL 34108

Title: PD ( ) Delete  
Name: TRUJILLO, NICOLAS F  
Address: 4405 NW 97TH AVE  
City-St-Zip: MIAMI, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

Title: D (X) Change ( ) Addition  
Name: SHULTZ, PETER  
Address: 801 PINE CREEK LANE  
City-St-Zip: NAPLES, FL 34108

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: AERLIM DIAZ

VP

04/24/2006

Electronic Signature of Signing Officer or Director

Date