

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000056362

FILED  
Aug 11, 2006  
Secretary of State

Entity Name: OCAMPO FLOORING, LLC

## Current Principal Place of Business:

417 FOREST OAK DR  
SEFFNER, FL 33584 US

## New Principal Place of Business:

112 SYCAMORE LN  
TAMPA, FL 33610 US

## Current Mailing Address:

417 FOREST OAK DR  
SEFFNER, FL 33584 US

## New Mailing Address:

112 SYCAMORE LN  
TAMPA, FL 33610 US

FEI Number: 13-4255892      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

## Name and Address of Current Registered Agent:

OCAMPO, EMANUEL  
417 FOREST OAK DR  
SEFFNER, FL 33584 US

## Name and Address of New Registered Agent:

OCAMPO, EMANUEL  
112 SYCAMORE LN  
TAMPA, FL 33610 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: EMANUEL OCAMPO

08/11/2006

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: OCAMPO, EMANUEL  
Address: 417 FOREST OAK DR  
City-St-Zip: SEFFNER, FL 33584 US

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: OCAMPO, EMANUEL  
Address: 112 SYCAMORE LN  
City-St-Zip: TAMPA, FL 33610 US

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: MANUEL OCAMPO

MGRM

08/11/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date