2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000017242

Entity Name: A.C.M. FLOOR COVERING, LLC

FILED Jun 09, 2006 Secretary of State

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

4418 25TH SW 5323 30TH ST SW

LEHIGH ACRES, FL 33911 LEHIGH ACRES, FL 33971

Current Mailing Address: New Mailing Address:

5323 30TH ST SW 7590 OMNI LANE

207 LEHIGH ACRES, FL 33971 FORT MYERS, FL 33905

FEI Number: 20-2381613 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: Name and Address of New Registered Agent:

MATA, ANDERSON P MATA, ANDERSON P 4418 25TH SW 5323 30TH ST SW

LEHIGH ACRES, FL 33911 LEHIGH ACRES, FL 33971 US 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.

ADDITIONS/CHANGES:

SIGNATURE: 06/09/2006

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

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

MATA, ANDERSON P MATA, ANDERSON P Name: Name: Address: 4418 25TH SW Address: 5323 30TH ST SW

City-St-Zip: LEHIGH ACRES, FL 33911 City-St-Zip: LEHIGH ACRES, FL 33971

Title: MGRM () Delete Title: MGRM (X) Change () Addition Name: MATA, CLEBIO S Name: MATA, CLEBIO S

Address: 7590 OMNI LANE #207 Address: 5323 30TH ST SW City-St-Zip: FORT MYERS, FL 33905 City-St-Zip: LEHIGH ACRES, FL 33971

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

ANGELO, EDVAN S Name: Name: 7590 OMNI LANE #207 Address: Address: City-St-Zip: FORT MYERS, FL 33905 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 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: ANDERSON P MATA 06/09/2006