

**FILED**  
**May 08, 2006 8:00 am**  
**Secretary of State**

05-08-2006 90297 019 \*\*\*159.00

**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

<b>DOCUMENT # P00000012070</b>	
<b>1. Entity Name</b> PROFESSIONAL WOOD LAMINATE FLOORING, INC.	

<b>Principal Place of Business</b> 1545 NE DARLICH AVE JENSEN BEACH, FL 34957	<b>Mailing Address</b> 1545 NE DARLICH AVE JENSEN BEACH, FL 34957
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**DO NOT WRITE IN THIS SPACE**



04182006 No Chg-P CR2E034 (11/05)

<b>4. FEI Number</b> 65-0982330	<b>Applied for</b> No: Applicable
<b>5. Certificate of Status Desired</b> <input checked="" type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>

**6. Name and Address of Current Registered Agent**

CASSEL, SEAN  
1545 DARLICH AVE  
JENSEN BEACH, FL 34957

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**8. 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. I am familiar with, and accept the obligations of registered agent.**

SIGNATURE: *Sean Cassel* DATE: 4-26-06

Signature must be printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when registering)

**FILE NOW!! FEE IS \$180.00 After May 1, 2006 Fee will be \$580.00**

**9. Election Campaign Financing**  **\$5.00 May be Added to Fee**

Trust Fund Contribution.

**10. OFFICERS AND DIRECTORS**

<b>TITLE</b> P	<b>NAME</b> CASSEL, SEAN
<b>STREET ADDRESS</b> 1545 DARLICH AVE	<b>CITY-ST-ZIP</b> JENSEN BEACH, FL 34957
<b>TITLE</b> NAME	<b>STREET ADDRESS</b> CITY-ST-ZIP
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**12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the member or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.**

SIGNATURE: *Sean Cassel* DATE: 4-26-06 DORING PHONE: 772-240-5518

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR