## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000054638

Entity Name: ACE PROFESSIONAL FLOORING CORP.

FILED Mar 30, 2005 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

OLIVEIRA, JOSE A

SARASOTA, FL 34240

7509 PALMER GLEN CIRCLE

(X) Change ( ) Addition

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

2597 BRIAR OAK CIRCLE 7509 PALMER GLEN CIRCLE SARASOTA, FL 34232 SARASOTA, FL 34240

**Current Mailing Address: New Mailing Address:** 

2597 BRIAR OAK CIRCLE 7509 PALMER GLEN CIRCLE SARASOTA, FL 34232 SARASOTA, FL 34240

FEI Number: 65-1111943 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

OLIVEIRA, JOSE A OLIVEIRA, JOSE A 2597 BRIÁR OAK CIRCLE 7509 PALMER GLEN CIRCLE SARASOTA, FL 34232 SARASOTA, FL 34240

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: JOSE A OLIVEIRA 03/30/2005

> Electronic Signature of Registered Agent Date

> > Title:

Name:

Address:

City-St-Zip:

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title: () Delete OLIVEIRA, JOSE A Name:

2597 BRIAR OAK CIRCLE Address: City-St-Zip: SARASOTA, FL 34232

Title: () Delete Name: DE OLIVEIRA, EDLA M 2597 BRIAR OAK CIRCLE Address: City-St-Zip:

Title: DVP (X) Change ( ) Addition DE OLIVEIRA, EDLA M Name: Address: 7509 PALMER GLEN CIRCLE SARASOTA, FL 34232 SARASOTA, FL 34240 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JOSE A OLIVEIRA DP 03/30/2005