

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000064583

Entity Name: FLOORS 2 U, INC.

FILED  
Apr 17, 2007  
Secretary of State

## Current Principal Place of Business:

830 STATE ROAD 436  
CASSELBERRY, FL 32707

## New Principal Place of Business:

## Current Mailing Address:

830 STATE ROAD 436  
CASSELBERRY, FL 32707

## New Mailing Address:

FEI Number: 59-3728572

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KEIDAISH, JR., PHILIP F  
505 WEKIVA SPRINGS ROAD, SUITE 800  
LONGWOOD, FL 32779 US

## Name and Address of New Registered Agent:

LAVALLIERE, DAVID M  
830 SR 436  
CASSELBERRY, FL 32707 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: DAVID M. LAVALLIERE

04/17/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: CAMPBELL, NANCY  
Address: 830 STATE ROAD 436  
City-St-Zip: CASSELBERRY, FL 32707

Title: D ( ) Delete  
Name: LAVALLIERE, DAVID  
Address: 830 STATE ROAD 436  
City-St-Zip: CASSELBERRY, FL 32707

Title: D ( ) Delete  
Name: ROCHE, DANIEL  
Address: 830 STATE ROAD 436  
City-St-Zip: CASSELBERRY, FL 32707

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change ( ) Addition  
Name: CAMPBELL, ROBERT J  
Address: 830 STATE ROAD 436  
City-St-Zip: CASSELBERRY, FL 32707

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: ROBERT J. CAMPBELL

D

04/17/2007

Electronic Signature of Signing Officer or Director

Date