


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 22, 2007 8:00 am
Secretary of State

01-22-2007 90094 036 ***158.75

DOCUMENT # P01000081194	
1. Entity Name PRESTIGE HARDWOOD FLOORING, INC.	

Principal Place of Business 1610 DALE CIRCLE SOUTH DUNEDIN, FL 34698	Mailing Address 1610 DALE CIRCLE SOUTH DUNEDIN, FL 34698
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2. Principal Place of Business - No P.O. Box # 1127 Main St.	3. Mailing Address Suite, Apt. #, etc.
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City & State Dunedin, Florida	City & State
Zip 34698	Country USA

6. Name and Address of Current Registered Agent MIRAMONTI, LISA M 1610 DALE CIRCLE SOUTH DUNEDIN, FL 34698	
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01192007 Chg-P CR2E034 (12/06)

4. FEI Number 59-3740985	Applied For Not Applicable
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5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
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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: <i>Lisa M. Miramonti</i>	Lisa Miramonti - V.P. - Sec/Tres 1/19/07

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P MIRAMONTI, TERENCE 1610 DALE CIRCLE SOUTH DUNEDIN, FL 34698 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VST MIRAMONTI, LISA 1610 DALE CIRCLE SOUTH DUNEDIN, FL 34698 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 receiver 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: <i>Lisa M. Miramonti</i>	Lisa Miramonti - VPS 1/19/07 727-734-4229