2007 FOR PROFIT CORPORATION

ANNUAL REPORT

DOCUMENT # P02000007607

1. Entity Name A&D FLOORING, INC.

Principal Place of Business

700 SW 6TH STREET HALLANDALE, FL 33009 Mailing Address

700 SW 6TH STREET HALLANDALE, FL 33009

US

FILED Apr 18, 2007 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

04152007 CR2E034 (11/05) No Chg-P Applied For 4. FEI Number

5. Certificate of Status Desired

26-0037785

\$8.75 Additional Fee Required

954-547-1919

Not Applicable

6. Name and Address of Current Registered Agent

ABDELQUADER, AMER 700 SW 6TH STREET HALLANDALE, FL 33009

SIGNATURE:

DO NOT WRITE IN THIS SPACE

8. The above the obligat	named entity submits this statement for the pions of registered agent.	ourpose of changing its registere	d affice or	registered agent, or bo	th, in the State of Florida. I am familiar with and accept
SIGNATURE_	Signature typed or printed name of registered agent and title	if applicable (NOTE: Registered	Agent signatur	e required when roinstating)	DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Finance Trust Fund Contribution.			cing	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIRE	CTORS			
NAME STREET ADDRESS CITY-ST-ZIP	P ABDELQUADER, AMER 700 SW 6TH STREET HALLANDALE, FL 33009				
TITLE NAME STREET ADDRESS CITY-ST-ZIP			į		
NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CHY-ST-ZIP				IN .	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CHY-SL-ZIP			000000714388 04/27/07-80021-012 150.00		

12. Thereby 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 attachpact with all other like empowered.

ED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR