


2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 31, 2006 08:00 AM
Secretary of State

DOCUMENT # P02000051616 1. Entity Name A & J WOOD FLOORS, INC.			
Principal Place of Business 10300 SW 16 ST MIAMI FL 33165		Mailing Address 10300 SW 16 ST MIAMI FL 33165	
2. Principal Place of Business 10300 SW 16 ST Suite, Apt. #, etc.		3. Mailing Address 10300 SW 16 ST Suite, Apt. #, etc.	
City & State Miami FL		City & State Miami FL	
Zip 33165		Zip 33165	
Country USA		Country USA	
4. FEI Number 04-3651816		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent DEL TORO, MARIA E 10300 SW 16TH STREET MIAMI FL 33165		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>	
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 _____ (NOTE: Registered Agent signature required when re-registering)			
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee Will Be \$550.00 Make Check Payable to Florida Department of State		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE PD	NAME DEL TORO, ANTONIO	<input type="checkbox"/> Delete	
STREET ADDRESS 10300 SW 16TH STREET	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
CITY-ST-ZIP MIAMI FL 33165	U000000486598 04/13/06-80043-022 150.00		
TITLE VSTD	NAME DEL TORO, MARIA E	<input type="checkbox"/> Delete	
STREET ADDRESS 10300 SW 16TH STREET	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
CITY-ST-ZIP MIAMI FL 33165	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE _____	NAME _____	<input type="checkbox"/> Delete	
STREET ADDRESS _____	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
CITY-ST-ZIP _____	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE _____	NAME _____	<input type="checkbox"/> Delete	
STREET ADDRESS _____	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
CITY-ST-ZIP _____	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE _____	NAME _____	<input type="checkbox"/> Delete	
STREET ADDRESS _____	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
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 Section 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: Antonio Del Toro 3/27/06