## **2008 FOR PROFIT CORPORATION**

SIGNATURE

## **FILED ANNUAL REPORT** Mar 28, 2008 08:00 Al **DOCUMENT # P02000114948** Secretary of State 1. Entity Name ISLAND FLOORS INC Principal Place of Business Mailing Address P O BOX 598 5261 PINE ISLAND RD.NW BOKEELIA, FL 33922 BOKEELIA, FL 33922 No Chg-P 03252008 CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 74-3066152 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MAZZOLI, ROD DO NOT WRITE 5261 PINE ISLAND RD.NW BOKEELIA, FL 33922 IN THIS SPACE 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 Signature, typed or printed name of registered agent and title # applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS **PTS** TITLE MAZZOLI, RODNEY STREET ADDRESS PO BOX 598 U00000873710 CITY-ST-ZIP BOKEELIA, FL 33922 04/10/08-80083-020 150.00 NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CiTY-S1-7IP IN THIS SPACE TITLE STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 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