

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000151762

FILED
Jun 21, 2006
Secretary of State

Entity Name: FLOOR COVERING CONCEPTS, INC.

Current Principal Place of Business:

8456 GARDENS CIRCLE
UNIT # 1
SARASOTA, FL 34243

New Principal Place of Business:

6618 ROCK BRIDGE LANE
ELLENTON, FL 34222

Current Mailing Address:

8456 GARDENS CIRCLE
UNIT # 1
SARASOTA, FL 34243

New Mailing Address:

6618 ROCK BRIDGE LANE
ELLENTON, FL 34222

FEI Number: 13-4248334

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FREYMAN, JOHN
8456 GARDENS CIRCLE
UNIT # 1
SARASOTA, FL 34243 US

Name and Address of New Registered Agent:

FREYMAN, JOHN
6618 ROCK BRIDGE
ELLENTON, FL 34222 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:

06/21/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPST () Delete
Name: FREYMAN, JOHN
Address: 8456 GARDENS CIRCLE UNIT # 1
City-St-Zip: SARASOTA, FL 34243

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST (X) Change () Addition
Name: FREYMAN, JOHN
Address: 6618 ROCK BRIDGE LANE
City-St-Zip: SARASOTA, FL 34243

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: JOHN FREYMAN

PTSD

06/21/2006

Electronic Signature of Signing Officer or Director

Date