2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000154849

Entity Name: LEGNO PRO FLOORING, INC.

FILED Jan 05, 2005 Secretary of State

Current Principal Place of Business: New Principal Place	of Business:
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1806 STERLING PALMS CT 13312 ASHBARK CT #203 RIVERVIEW, FL 33569

BRANDON, FL 33511

Current Mailing Address: New Mailing Address:

1806 STERLING PALMS CT 11625 CREST CREEK DR. #203 RIVERVIEW, FL 33569 BRANDON, FL 33511

FEI Number: 27-0074949 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MARIN, MANUEL
1806 STERLING PALMS CT
#203
BRANDON, FL 33511 US

MARIN, MANUEL
13312 ASHBARK CT
RIVERVIEW, FL 33569 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: 01/05/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition Name: MARIN, MANUEL P (X) Change () Addition Name: MARIN, MANUEL

 Name:
 MARIN, MANUEL
 Name:
 MARIN, MANUEL

 Address:
 1806 STERLING PALMS CT #203
 Address:
 13312 ASHBARK CT

 City-St-Zip:
 BRANDON, FL 33511
 City-St-Zip:
 RIVERVIEW, FL 33569

Title: V () Delete Title: V (X) Change () Addition Name: BONAPARTE, GUILHERME Name: BONAPARTE, GUILHERME

Address: 1806 STERLING PALMS CT #203 Address: 11625 CREST CREEK DR. City-St-Zip: BRANDON, FL 33511 City-St-Zip: RIVERVIEW, FL 33569

Title: S () Delete Title: S (X) Change () Addition Name: MARIN, SIMONE B Name: MARIN, SIMONE B

Address: 1806 STERLING PALMS CT #203 Address: 22 11 STERLING PALMS CT #202

City-St-Zip: BRANDON, FL 33511 City-St-Zip: BRANDON, FL 33511

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: GUILHERME BONAPARTE V 01/05/2005