2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000156611

Title:

Name:

Address:

City-St-Zip:

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KOSMICKI, JESSICA

4080 BUTTON BUSH CR

LAKELAND, FL 33811

FILED Apr 30, 2007 Secretary of State

Entity Name: FRED KOSMICKI CARPET & TILE INSTALLATION, INC.							
Current Principal Place of Business:				New Principal Place of Business:			
4080 BUTTON BUSH CIRCLE LAKELAND, FL 33811				5052 ASHWOOD DR LAKELAND, FL 33811			
Current Mailing Address:				New Mailing Address:			
4080 BUTTON BUSH CIRCLE LAKELAND, FL 33811				5052 ASHWOOD DR LAKELAND, FL 33811			
FEI Number:	75-3161130	FEI Number Applied For ()	FEI Num	nber Not Appli	cable ()	Certificate of Statu	ıs Desired ()
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
KOSMICKI, FRED 4080 BUTTON BUSH CIRCLE LAKELAND, FL 33811 US				KOSMICKI, FRED 5052 ASHWOOD DR LAKELAND, FL 33811 US			
The above r		bmits this statement for the pur	pose of	f changing its	s registered of	fice or registered	agent, or both,
SIGNATURE:				04/30/2007			
Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ().							
		.,					
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	P () D KOSMICKI, FRED 4080 BUTTON BU LAKELAND, FL 3	SH CIRCLE		Title: Name: Address: City-St-Zip:	P (X) KOSMICKI, FRE 5052 ASHWOOI LAKELAND, FL	D DR	
Title: Name: Address: City-St-Zip:	V () D KOSMICKI, STEV 2335 KATHRYN A WINTER HAVEN,	EN VE		Title: Name: Address: City-St-Zip:	V (X) KOSMICKI, STE 2335 KATHRYN LAKELAND, FL	AVE	

I hereby certify that the information supplied with this filing does not qualify 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 an an enterphase with an eddress with all other like empowered. above, or on an attachment with an address, with all other like empowered.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: JESSICA KOSMICKI 04/30/2007 Τ

(X) Change () Addition

KOSMICKI, JESSICA

5052 ASHWOOD DR

LAKELAND, FL 33811