## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000157349

Entity Name: CRA FLOORING INC.

Address:

City-St-Zip:

**FILED** Apr 16, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 6801 EASTPOINT PINES STREET PALM BEACH GARDENS, FL 33418 **Current Mailing Address: New Mailing Address:** 6801 EASTPOINT PINES STREET PALM BEACH GARDENS, FL 33418 FEI Number: 20-0521590 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LINDA ARAUJO 6801 EASTPOINTE PINES STREET PALM BEACH GARDENS, FL 33418 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete () Change () Addition ROSA ARAUJO, CLAUDIO Name: Name: 6801 EASTPOINT PINES STREET Address: Address: City-St-Zip: PALM BEACH GARDENS, FL 33418 City-St-Zip: Title: VP/D () Delete Title: () Change () Addition Name: ARAUJO, LINDA Name: 6801 EAST POINT PINES STREET Address:

City-St-Zip:

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 on an attachment with an address, with all other like empowered.

Ρ SIGNATURE: CLAUDIO ARAUJO 04/16/2009

PALM BEACH GARDENS, FL 33418 US