2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 16, 2009
Secretary of State

DOCUMENT# P04000008991

Entity Name: ARTEAGA FLOOR COVERING, INC.

Current Principal Place of Business:

122 RICHMAR AVE
HAINES CITY, FL 338447311

New Principal Place of Business:

1400 N 20TH STREET
HAINES CITY, FL 338449417 US

Current Mailing Address:

122 RICHMAR AVE
HAINES CITY, FL 338447311

New Mailing Address:

1400 N 20TH STREET
HAINES CITY, FL 338449417 US

FEI Number: 20-0600900 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ARTEAGA, SALVADOR S
122 RICHMAR AVENUE
HAINES CITY, FL 33844 US

Name and Address of New Registered Agent:

ARTEAGA, SALVADOR S
1400 N 20TH STREET
HAINES CITY, FL 33844 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: SALVADOR S ARTEAGA 03/16/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: ARTEAGA, SALVADOR S
Address: 122 RICHMAR AVENUE
City-St-Zip: HAINES CITY, FL 33844

Title: S ( ) Delete
Name: SALVADOR, ARTEAGA III
Address: 3646 JOHNSON AVE
City-St-Zip: HAINES CITY, FL 33844

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: ARTEAGA, SALVADOR S
Address: 1400 N 20TH STREET
City-St-Zip: HAINES CITY, FL 33844

Title: ( ) Change ( ) Addition
Name:
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.

SIGNATURE: SALVADOR S ARTEAGA PRES 03/16/2009
Electronic Signature of Signing Officer or Director Date