2008 FOR PROFIT CORPORATION

ANNUAL REPORT FILED DOCUMENT # P04000019919 Jul 31, 2008 08:00 AM Secretary of State 1. Entity Name GARCIA FLOORING ENTERPRISE, INC Principal Place of Business Mailing Address 455 NW 125 ST 455 NW 125 ST MIAMI, FL 33168 MIAMI, FL 33168 07222008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 20-0823382 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent GARCIA VARGAS, EDMUNDO DO NOT WRITE 455 NW 125 ST MIAMI, FL 33168 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. 000000956809 07/31/08-80005-021 150.00 Signature, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the Due by September 12, 2008 Trust Fund Contribution. Added to Fees corporation did not receive the prior notice. 10. OFFICERS AND DIRECTORS TITLE NAME GARCIA VARGAS, EDMUNDO STREET ADDRESS 455 NW 125 ST CITY - ST - 7IP MIAMI, FL 33168 TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CHY-ST-ZIP

IGNATURE AND TYPED OR AME OF SIGNING OFFICER OR DIRECTOR