2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2007
Secretary of State

DOCUMENT# P04000043889

Entity Name: MONACO FLOORING INC.

Current Principal Place of Business:

523 COUNTY RD 731
VENUS, FL 33960

New Principal Place of Business:

Current Mailing Address:

215 NE 14TH AVE
POMPANO BEACH, FL 33060

New Mailing Address:

FEI Number: 20-0864398 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SWINTON, PAUL
215 NE 14TH AVE.
POMPANO BEACH, FL 33060 US

Name and Address of New Registered Agent:

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:

Title: PRES ( ) Delete
Name: SWINTON, PAUL
Address: 215 NE 14TH AVE.
City-St-Zip: POMPANO BEACH, FL 33060

Title: VP ( ) Delete
Name: MONACO, DARREN
Address: 523 COUNTY ROAD 731
City-St-Zip: VENUS, FL 33960

Title: SEC ( ) Delete
Name: MONACO, DARREN
Address: 523 COUNTY ROAD 731
City-St-Zip: VENUS, FL 33960

Title: TREA ( ) Delete
Name: SWINTON, PAUL
Address: 215 NE 14TH AVE.
City-St-Zip: POMPANO BEACH, FL 33060

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PR (X) Change ( ) Addition
Name: SWINTON, PAUL
Address: 215 NE 14TH AVE.
City-St-Zip: POMPANO BEACH, FL 33060

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: PAUL SWINTON OFF 04/18/2007

Electronic Signature of Signing Officer or Director Date