

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000057761

Entity Name: TECH FLOORING, INC.

FILED  
Apr 30, 2007  
Secretary of State

## Current Principal Place of Business:

1012 NW 10TH TERRACE  
CAPE CORAL, FL 33993

## New Principal Place of Business:

1412 NW 10TH TERRACE  
CAPE CORAL, FL 33993

## Current Mailing Address:

1012 NW 10TH TERRACE  
CAPE CORAL, FL 33993

## New Mailing Address:

1412 NW 10TH TERRACE  
CAPE CORAL, FL 33993

FEI Number: 20-0959389

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

SUMMERS, MARLI  
5230 CENTENNIAL BLVD  
LEHIGH ACRES, FL 33971 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: P ( ) Delete  
Name: LAURIA, ANDRE N  
Address: 5228 CENTENNIAL BLVD.  
City-St-Zip: LEHIGH ACRES, FL 33971

Title: V ( ) Delete  
Name: TROFINO, PAULO R  
Address: 128 SW 16TH TERRACE  
City-St-Zip: CAPE CORAL, FL 33991

Title: D (X) Delete  
Name: MACHADO, ALBERTO  
Address: 15641 SONOMA DR # 107  
City-St-Zip: FORT MYERS, FL 33908

Title: S (X) Delete  
Name: RUIVO, ROMUALDO  
Address: 128 SW 16TH TERRACE  
City-St-Zip: CAPE CORAL, FL 33991

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 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: ANDRE N LAURIA

P

04/30/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date