

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000058930

FILED  
Apr 26, 2005  
Secretary of State

Entity Name: ALLIED FLOORS DIRECT OF LEESBURG, INC.

## Current Principal Place of Business:

610 NORTH 14TH ST.  
LEESBURG, FL 34749

## New Principal Place of Business:

## Current Mailing Address:

610 NORTH 14TH ST.  
LEESBURG, FL 34749

## New Mailing Address:

FEI Number: 55-0865109

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CLAUDINO, JESSIANE M  
5996 BENT PINE DR., APT. 3302  
ORLANDO, FL 32822 US

## Name and Address of New Registered Agent:

CLAUDINO, JESSIANE M  
4864 ADAIR OAK DR  
ORLANDO, FL 32829 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: JESSIANE M CLAUDINO

04/26/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: VS ( ) Delete  
Name: CLAUDINO, CHARLES  
Address: 5996 BENT PINE DR.  
City-St-Zip: ORLANDO, FL 32822

Title: PT ( ) Delete  
Name: CLAUDINO, JEFFERSON  
Address: 5996 BENT PINE DR.  
City-St-Zip: ORLANDO, FL 32822

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: CLAUDINO, CHARLES  
Address: 4864 ADAIR OAK DR  
City-St-Zip: ORLANDO, FL 32829 US

Title: DS (X) Change ( ) Addition  
Name: CLAUDINO, JESSIANE M  
Address: 4864 ADAIR OAK DR  
City-St-Zip: ORLANDO, FL 32829 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CHARLES CLAUDINO

DP

04/26/2005

Electronic Signature of Signing Officer or Director

Date