2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006
Secretary of State

DOCUMENT# P04000065953

Entity Name: CLEBER FLOOR COVERING, INC.

Current Principal Place of Business:

1105 ALBANY AVE.
LEHIGH ACRES, FL 33971

New Principal Place of Business:

Current Mailing Address:

1105 ALBANY AVE.
LEHIGH ACRES, FL 33971

New Mailing Address:

FEI Number: 20-1038987 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TAX HOUSE CORPORATION
1261 E SAMPLE RD
POMPNAO BEACH, FL 33064 US

Name and Address of New Registered Agent:

TAX HOUSE CORPORATION
11607 S CLEVELNAD AVE
ST 6
FORT MYERS, FL 33907 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: TAX HOUSE CORP 05/01/2006
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: GERONIMO DA SILVA, ANGELIN
Address: 1105 ALBANY AVE.
City-St-Zip: LEHIGH ACRES, FL 33971

Title: TD ( ) Delete
Name: FLORES, CANDIDO
Address: 16891 CARMEN AVE., #A
City-St-Zip: FORT MYERS, FL 33908

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: DA SILVA, ANGELIN G
Address: 1105 ALBANY AVE.
City-St-Zip: LEHIGH ACRES, FL 33971

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: ANGELIN DA SILVA PD 05/01/2006
Electronic Signature of Signing Officer or Director Date