## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000069665

City-St-Zip:

FORT MYERS, FL 33908

Entity Name: KELLIE O'HARA CARPET INSTALLATION INC.

FILED Apr 30, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 10720 CLEAR LAKE LOOP 1109 SE 24TH AVE US CAPE CORAL, FL 33990 FORT MYERS, FL 33908 **New Mailing Address: Current Mailing Address:** 10720 CLEAR LAKE LOOP 1109 SE 24TH AVE CAPE CORAL, FL 33990 US FORT MYERS, FL 33908 FEI Number: 84-1645686 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of New Registered Agent: Name and Address of Current Registered Agent: O'HARA, KELLIE O'HARA, KELLIE 10720 CLEARLAKE LOOP #294 1109 SE 24TH AVE FORT MYERS, FL 33908 CAPE CORAL, FL 33990 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: 04/30/2008 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change ( ) Addition Title: ( ) Delete Title: O'HARA, KELLIE O'HARA, KELLIE Name: Name: 10720 CLEARLAKE LOOP #294 1109 SE 24TH AVE Address: Address: City-St-Zip: FORT MYERS, FL 33908 City-St-Zip: CAPE CORAL, FL 33990 US Title: VΡ Title: VΡ () Delete (X) Change ( ) Addition Name: BLANCO, JONATHAN Name: BLANCO, JONATHAN 10720 CLEAR LAKE LOOP #294 1109 SE 24TH AVE Address: Address: FORT MYERS, FL 33908 CAPE CORAL, FL 33990 US City-St-Zip: City-St-Zip: Title: Title: (X) Delete () Change () Addition FERRER, LEONEL Name: Name: 10720 CLEAR LAKE LOOP #294 Address: Address: City-St-Zip: FORT MYERS, FL 33908 City-St-Zip: Title: (X) Delete Title: () Change () Addition VIDAL, FRANCISCO Name: Name: Address: 10720 CLEAR LAKE LOOP #294 Address:

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.

City-St-Zip:

SIGNATURE: KELLIE OHARA PRES 04/30/2008