2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000096272

ECONO CARPET & FLOORING, INC.



FILED Apr 26, 2006 08:00 AN Secretary of State

Principal Place of Business

2710 DEL PRADO BLVD - #2-246 CAPE CORAL, FL 33904

Mailing Address

2710 DEL PRADO BLVD - #2-246 CAPE CORAL, FL 33904



04272006

No Chg-P

CR2E034 (11/05)

4. FEI Number 34-2003024 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

BURANDT, ROBERT B ESQ 1714 CAPE CORAL PKWY EAST CAPE CORAL, FL 33904

DO NOT WRITE IN THIS SPACE

8. The above the obligat	named entity submits this statement for the pions of registered agent.	purpose of changing its registere	d office or r	egistered agent, or b	oth, in the State of Florida. I am fan	illiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and title	if applicable. (NOTE, Registered	Agent signature	e required when reinstating)	DATE	
	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00	Election Campaign Finan Trust Fund Contribution.		\$5.00 May Be Added to Fees	UNDUQUS37829 Q5709706-80035-804	150,00
TITLE NAME STREET ADDRESS CITY-SI-ZIP	PD FIDLER, CAROL 2710 DEL PRADO BLVD - #2-246 CAPE CORAL, FL 33904	21000				
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO NOT WRITE IN THIS SPACE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
nice Name Street address City-St-Zip						
TITLE			i			

12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE: BAROL FIDLER

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4. 29, 2006