2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000114601

Entity Name: CRF CARPET, CORP

FILED Aug 06, 2008 Secretary of State

Current Princip	pal Place of Business:	New Principal Place of Business

647 SW VERONICA AVENUE 4087 CRYSTAL LAKE DR

PORT ST LUCIE, FL 34953 US POMPANO BEACH, FL 33064 US

Current Mailing Address: New Mailing Address:

647 SW VERONICA AVENUE 4087 CRYSTAL LAKE DR

PORT ST LUCIE, FL 34953 US POMPANO BEACH, FL 33064 US

FEI Number: 20-1463460 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FERNANDES, CELIO R FERNANDES, CELIO R 647 SW VERÓNICA AVENUE 4087 CRYSTÁL LAKE DR PORT ST. LUCIE, FL 34953 US POMPANO BEACH, FL 33064 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: CELIO R FERNANDES 08/06/2008

> 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: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition FERNANDES, CELIO R FERNANDES, CELIO R Name: Name: 647 SW VERONICA AVENUE 4087 CRYSTAL LAKE DR Address: Address:

City-St-Zip: PORT ST. LUCIE, FL 34953 US City-St-Zip: POMPANO BEACH, FL 33064 US

Title: () Delete Title: () Change (X) Addition MIRANDA, RAUL Name: Name:

Address: Address: 4087 CRYSTAL LAKE DR POMPANO BEACH, FL 33064 US City-St-Zip: 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: CELIO FERNANDES P/D 08/06/2008