

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000121345

Entity Name: ESPINOSA FLOOR COVERING, INC.

FILED
Feb 18, 2005
Secretary of State

Current Principal Place of Business:

113 PRIMA VISTA BLVD.
PORT ST. LUCIE, FL 34983

New Principal Place of Business:

1007 SE WALTON LAKES DRIVE
PORT ST. LUCIE, FL 34952

Current Mailing Address:

113 PRIMA VISTA BLVD.
PORT ST. LUCIE, FL 34983

New Mailing Address:

1007 SE WALTON LAKES DRIVE
PORT ST. LUCIE, FL 34952

FEI Number: 20-1522642

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ESPINOSA, ROMAN
113 PRIMA VISTA BLVD.
PORT ST. LUCIE, FL 34983 US

Name and Address of New Registered Agent:

ESPINOSA, ROMAN
1007 SE WALTON LAKES DRIVE
PORT ST. LUCIE, FL 34952 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: ROMAN ESPINOSA

02/18/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P/D () Delete
Name: ESPINOSA, ROMAN
Address: 113 PRIMA VISTA BLVD.
City-St-Zip: PORT ST. LUCIE, FL 34983

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D (X) Change () Addition
Name: ESPINOSA, ROMAN
Address: 1007 SE WALTON LAKES DRIVE
City-St-Zip: PORT ST. LUCIE, FL 34952

Title: SEC () Change (X) Addition
Name: PEREZ, MARLEN
Address: 1007 SE WALTON LAKES DRIVE
City-St-Zip: PORT ST LUCIE, FL 34952

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: ROMAN ESPINOSA

PRES

02/18/2005

Electronic Signature of Signing Officer or Director

Date