

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P04000126767

1. Entity Name
CUMEX FLOORING CORP



**FILED
Sep 08, 2005 8:00 am
Secretary of State**

09-08-2005 90072 050 ***150.00

50065751



09052005 Chg-P CR2E034 (10/03)

Principal Place of Business
9408 LARBUNTING DRIVE
TAMPA, FL 33647

Mailing Address
9408 LARBUNTING DRIVE
TAMPA, FL 33647

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

4. FEI Number
20-1574665

Applied For
Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

CHAVEZ, DORA E
9408 LARBUNTING DRIVE
TAMPA, FL 33647

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$50.00
Due by September 7, 2005**

9. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P Delete
NAME CHAVEZ, DORA E
STREET ADDRESS 9408 LARBUNTING DRIVE
CITY-ST-ZIP TAMPA, FL 33647

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/11/05

Date

Daytime Phone #

ATTACHMENT

~~50065257~~
P04000126767

CUMEX FLOORING CORP

9408 Larkbunting Dr.
Tampa, FL 33647

Dear Sir / Madam:

We did not receive our annual report form. We contacted your office and was advised to send the report by mail with this letter.

Sincerely
Dora E. Chavez
President