2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000132791

Entity Name: AMAZING LAMINATE FLOORS, INC.

FILED Jul 26, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

461 SE VOLKERTS TERRACE 3781 SW SWOPE STREET PORT ST. LUCIE, FL 34983 PORT ST. LUCIE, FL 34953

Current Mailing Address: New Mailing Address:

3781 SW SWOPE STREET **461 SE VOLKERTS TERRACE** PORT ST. LUCIE, FL 34953 PORT ST. LUCIE, FL 34983

FEI Number: 20-2160462 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:

ACOCELLA, ANDRE ACOCELLA, ANDRE 461 SE VOLKERTS TERRACE 3781 SW SWOPE STREET PORT ST. LUCIE, FL 34983 PORT ST. LUCIE, FL 34953 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: ANDRE ACOCELLA 07/26/2006

> 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:

VΡ

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

VΡ

Title: () Delete Title: (X) Change () Addition ACOCELLA, ANDRE ACOCELLA, ANDRE Name: Name: 461 SE VOLKERTS TERRACE Address: 3781 SW SWOPE STREET Address: City-St-Zip:

PORT ST. LUCIE, FL 34983 City-St-Zip: PORT ST. LUCIE, FL 34953

() Delete Title: Title: (X) Change () Addition ACOCELLA, ADRIANA L Name: ACOCELLA, ADRIANA L Name: 461 SE VOLKERTS TERRACE Address: 3781 SW SWOPE STREET Address: PORT ST. LUCIE, FL 34983 PORT ST. LUCIE, FL 34953 City-St-Zip: City-St-Zip:

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

VΡ SIGNATURE: ADRIANA L. ACOCELLA 07/26/2006