

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000135745

FILED  
Apr 27, 2009  
Secretary of State

Entity Name: SOUTH AMERICA WOOD FLOOR CORP

## Current Principal Place of Business:

2655 COLLINS AVE  
APT 1205  
MIAMI BEACH, FL 33140

## Current Mailing Address:

2655 COLLINS AVE  
APT 1205  
MIAMI BEACH, FL 33140

## New Principal Place of Business:

100 BAY VIEW DRIVE  
# 1129  
SUNNY ISLES, FL 33160

## New Mailing Address:

100 BAY VIEW DRIVE  
# 1129  
SUNNY ISLES, FL 33160

FEI Number: 65-1234313

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CARABELLI, ROMINA  
400 KING PORT DR.  
SUNNY ISLAND, FL 33160 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: CARABELLI, ROMINA  
Address: 2655 COLLINS AVE, # 1205  
City-St-Zip: MIAMI BEACH, FL 33140

Title: VP ( ) Delete  
Name: CARABELLI, OSCAR  
Address: 2655 COLLINS AVE, # 1205  
City-St-Zip: MIAMI BEACH, FL 33140

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: CARABELLI, ROMINA  
Address: 100 BAY VIEW DRIVE  
City-St-Zip: SUNNY ISLES, FL 33160

Title: VP (X) Change ( ) Addition  
Name: CARABELLI, OSCAR  
Address: 100 BAY VIEW DRIVE  
City-St-Zip: SUNNY ISLES, FL 33160

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: ROMINA CARABELLI

D

04/27/2009

Electronic Signature of Signing Officer or Director

Date