

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000136532

Entity Name: FLOOR DOCTOR II INC.

FILED
Apr 29, 2009
Secretary of State

Current Principal Place of Business:

864 SAINT TOPEZ COURT
PORT SAINT LUCIE, FL 34986

New Principal Place of Business:

864 SAINT TROPEZ COURT
PORT SAINT LUCIE, FL 34986

Current Mailing Address:

864 SAINT TOPEZ COURT
PORT SAINT LUCIE, FL 34986

New Mailing Address:

864 SAINT TROPEZ COURT
PORT SAINT LUCIE, FL 34986

FEI Number: 01-0821453

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REMERI, JOHN
864 SAINT TROPEZ COURT
PORT SAINT LUCIE, FL 34986 US

Name and Address of New Registered Agent:

RANERI, JOHN
864 SAINT TROPEZ COURT
PORT SAINT LUCIE, FL 34986 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: JOHN RANERI

04/29/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: RANERI, JOHN
Address: 864 SAINT TOPEZ COURT
City-St-Zip: PORT SAINT LUCIE, FL 34986

Title: VSTD () Delete
Name: RANERI, FRANCINE
Address: 864 SAINT TOPEZ COURT
City-St-Zip: PORT SAINT LUCIE, FL 34986

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: RANERI, JOHN
Address: 864 SAINT TROPEZ COURT
City-St-Zip: PORT SAINT LUCIE, FL 34986

Title: VSTD (X) Change () Addition
Name: RANERI, FRANCINE
Address: 864 SAINT TROPEZ COURT
City-St-Zip: PORT SAINT LUCIE, FL 34986

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: FRANCINE RANERI

VSTD

04/29/2009

Electronic Signature of Signing Officer or Director

Date