2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000146145

Entity Name: JUSTIN FLOOR COVERING, INC.

FILED May 06, 2008 Secretary of State

4790 S. CLEVELAND AVENUE UNIT 207 5319 BYWOOD STREET FORT MYERS, FL 33907 LEHIGH ACRES, FL 33971

Current Mailing Address: New Mailing Address:

4790 S. CLEVELAND AVENUE UNIT 207 5319 BYWOOD STREET FORT MYERS, FL 33907 US LEHIGH ACRES, FL 33971

FEI Number: 20-2093586 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:

DA COSTA, RENATO 4790 S. CLÉVELAND AVENUE 207 FORT MYERS, FL 33907 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:

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: PRFS (X) Change () Addition DA COSTA, RENATO ANTONIO DA COSTA, RENATO ANTONIO Name: Name: 4790 S. CLEVELAND AVENUE UNIT 207 4790 S. CLEVELAND AVENUE UNIT 207 Address: Address: City-St-Zip: FORT MYERS, FL 33907 US City-St-Zip: FORT MYERS, FL 33907 US

() Delete Title: (X) Change () Addition Title: NOGUEIRA, CARLOS Name: PIRES, HUMBERTO H Name:

4790 S. CLEVELAND AVENUE UNIT 207 4790 S. CLEVELAND AVENUE UNIT 207 Address: Address:

FT MYERS, FL 33907 US FORT MYERS, FL 33907 City-St-Zip: City-St-Zip:

() Delete Title: Title: (X) Change () Addition DA SILVA LIMA, EMERSON DA SILVA LIMA, EMERSON Name: Name:

4790 S. CLEVELAND AVENUE UNIT 207 4790 S. CLEVELAND AVENUE UNIT 207 Address: Address:

City-St-Zip: FORT MYERS, FL 33907 City-St-Zip: FORT MYERS, FL 33907

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: RENATO DA COSTA **PRES** 05/06/2008