2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

Apr 30, 2007 8:00 am Secretary of State **DOCUMENT # P04000148755** 04-30-2007 90442 041 ***150.00 EXODO WOOD FLOORS, CORP. Principal Place of Business Mailing Address 9039 SW 133RD CT 40090734 9039 SW 133RD CT SUITE F SUITE F MIAMI, FL 33186 MIAMI, FL 33186 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. th 04242007 CR2E034 (12/06) Cha-P 4 FFI Number Applied For City & State City & State Mah 54-2161797 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name KEMP, HUGO Street Address (P.O. Box Number is Not Acceptable) **8251 SW 152ND AVENUE** #3 MIAMI, FL 33193 m a 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. (NOTE: Registered Agent signature required when rematating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11. **PSD** ☐ Change TITLE ☐ Delete TITLE HAME KEMP, HUGO A NAME 8251 SW 152ND AVENUE CIRCLE #3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33193 CITY-ST-ZIP ☐ Addition VTD Delete TITLE TITLE NAME PEREIRA, RICHARD 3556 SW 23 street STREET ADDRESS 3066 SW 20TH STREET STREET ADDRESS CORAL GABLES, FL 33145 CITY-ST-ZIP CITY-ST-ZIP Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Change Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Channe ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 of the corporation or the receiver or trustee changed, or on an attachment with an add HUGO SIGNATURE:

FILED