

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000157719

Entity Name: G & B FLOORING INC

FILED
Jan 08, 2007
Secretary of State

Current Principal Place of Business:

8639 N HIMES AVE
3102
TAMPA, FL 33614 US

New Principal Place of Business:

6113 OAK CLUSTER CIR
TAMPA, FL 33634 US

Current Mailing Address:

8639 N HIMES AVE
3102
TAMPA, FL 33614 US

New Mailing Address:

6113 OAK CLUSTER CIR
TAMPA, FL 33634 US

FEI Number: 20-2124645

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

TORRES-PICCIOTTI, GINO
8639 N HIMES AVE
3102
TAMPA, FL 33614 US

Name and Address of New Registered Agent:

TORRES-PICCIOTTI, GINO
6113 OAK CLUSTER CIR
TAMPA, FL 33634 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:

01/08/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: TORRES-PICCIOTTI, GINO
Address: 8639 N HIMES AVE APT 3102
City-St-Zip: TAMPA, FL 33614 US

Title: VP,S () Delete
Name: TORRES-PICCIOTTI, BRUNO
Address: 8639 N HIMES AVE APT 3102
City-St-Zip: TAMPA, FL 33614 US

Title: T () Delete
Name: TORRES-PICCIOTTI, SERGIO
Address: 6111 OAK CLUSTER CIRCLE
City-St-Zip: TAMPA, FL 33634 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: TORRES-PICCIOTTI, GINO
Address: 6113 OAK CLUSTER CIR
City-St-Zip: TAMPA, FL 33634 US

Title: T (X) Change () Addition
Name: TORRES-PICCIOTTI, BRUNO
Address: 6113 OAK CLUSTER CIR
City-St-Zip: TAMPA, FL 33634 US

Title: VP,S (X) Change () Addition
Name: TORRES-PICCIOTTI, SERGIO
Address: 6111 OAK CLUSTER CIRCLE
City-St-Zip: TAMPA, FL 33634 US

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.

SIGNATURE: TORRES-PICCIOTTI GINO

P

01/08/2007

Electronic Signature of Signing Officer or Director

Date