

2005 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Oct 10, 2005
Secretary of State

DOCUMENT# P04000166281

Entity Name: CENTER FLOORS CORP.

Current Principal Place of Business:

5307 SUMMERLIN AVE SUITE 09
FT MYERS, FL 33919

New Principal Place of Business:

2400 LOLA AVENUE S
LEHIGH ACRES, FL 33971

Current Mailing Address:

5307 SUMMERLIN AVE SUITE 09
FT MYERS, FL 33919

New Mailing Address:

2400 LOLA AVENUE S
LEHIGH ACRES, FL 33971

FEI Number: 20-1990814

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TAX HOUSE CORPORATION
1261 E SAMPLE RD
POMPANO BEACH, FL 33064 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: TAX HOUSE CORPORATION

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:

Title: P () Delete
Name: UENO, JULIO M
Address: 5307 SUMMERLIN AVE SUITE 09
City-St-Zip: FT MYERS, FL 33919

Title: D () Delete
Name: DE LIMA, ANILTON F
Address: 9846 BERNWOOD PLACE SUITE 113
City-St-Zip: FT MYERS, FL 33912

Title: D () Delete
Name: TEXEIRA, EDNEY B
Address: 9846 BERNWOOD PLACE SUITE 113
City-St-Zip: FT MYERS, FL 33912

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: UENO, JULIO M
Address: 2400 LOLA AVENUE S
City-St-Zip: LEHIGH ACRES, FL 33971

Title: D (X) Change () Addition
Name: DE LIMA, ANILTON F
Address: 2513 FIRST STREET # 37
City-St-Zip: FT MYERS, FL 33901

Title: D (X) Change () Addition
Name: TEXEIRA, EDNEY B
Address: 2513 FIRST STREET # 37
City-St-Zip: FT MYERS, FL 33901

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JULIO M UENO

Electronic Signature of Signing Officer or Director

P

10/10/2005

Date