


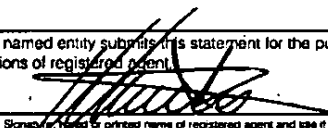

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

2. Mar 01, 2006 8:00 am  
Secretary of State

02-08-2006 90002 016 \*\*\*150.00

66003201

|   |  |   |  |
|---|--|---|--|
| DOCUMENT # P05000014083   |  |    |  |
| 1. Entity Name<br>CARPET & FLOOR SOLUTIONS, INC.  |  |   |  |
| Principal Place of Business<br>1141 SE 7TH CT APT 108<br>DANIA BEACH, FL 33004  |  | Mailing Address<br>1141 SE 7TH CT APT 108<br>DANIA BEACH, FL 33004  |  |
| 2. Principal Place of Business<br>1750 NE 191ST ST.   |  | 3. Mailing Address<br>1750 NE 191ST ST.   |  |
| Suite, Apt. #, etc.<br>APT. #104  |  | Suite, Apt. #, etc.<br>APT. #104  |  |
| City & State<br>NORTH MIAMI BEACH, FL   |  | City & State<br>NORTH MIAMI BEACH, FL   |  |
| Zip<br>33179  | Country<br>U.S.A   | Zip<br>33179  | Country<br>U.S.A   |
| 4. FEI Number<br>20-2286765   |  | Applied For<br><input checked="" type="checkbox"/> Not Applicable   |  |
| 5. Certificate of Status Desired <input type="checkbox"/>   |  | \$8.75 Additional Fee Required  |  |
| 8. Name and Address of Current Registered Agent<br>HARVALIS, MARIO<br>1141 SE 7TH CT APT 108<br>DANIA BEACH, FL 33004   |  | 7. Name and Address of New Registered Agent<br>Name HARVALIS, MARIO<br>Street Address (P.O. Box Number is Not Acceptable)<br>1750 NE 191ST ST. #104<br>City NORTH MIAMI BEACH FL Zip Code 33179 |  |
| 9. 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.   |  |   |  |
| SIGNATURE:    |  | DATE: 01/19/06  |  |
| FILE NOW!! FEE IS \$150.00<br>After May 1, 2006 Fee will be \$550.00  |  | 9. Election Campaign Financing<br>Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees   |  |
| 10. OFFICERS AND DIRECTORS  |  | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11   |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | P. HARVALIS, MARIO<br>1141 SE 7TH CT APT 108<br>DANIA BEACH, FL 33004 <input type="checkbox"/> Delete    | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | P. HARVALIS, MARIO<br>1750 NE 191ST ST. #104<br>NORTH MIAMI BEACH, FL 33179 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | VS HARVALIS, DIMITRIS<br>1141 SE 7TH CT APT 108<br>DANIA BEACH, FL 33004 <input type="checkbox"/> Delete | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | VS HARVALIS, DIMITRIS<br>1299 SE 7TH AVE. #103<br>DANIA, FL 33004 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition           |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | <input type="checkbox"/> Delete  | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | <input type="checkbox"/> Change <input type="checkbox"/> Addition  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | <input type="checkbox"/> Delete  | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | <input type="checkbox"/> Change <input type="checkbox"/> Addition  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | <input type="checkbox"/> Delete  | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | <input type="checkbox"/> Change <input type="checkbox"/> Addition  |
| 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 changed, or on an attachment with an address with all other I am empowered. |  |   |  |
| SIGNATURE:   |  | DATE: 01/19/06 954-445-4703   |  |
| SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  |  | Date Daytime Phone #  |  |



ATTACHMENT

66003201

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 9, 2006

CARPET & FLOOR SOLUTIONS, INC.  
1750 NE 191 ST  
APT 104  
MIAMI, FL 33179

Subject: CARPET & FLOOR SOLUTIONS, INC.

Reference Number: P05000014083

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report **has not been filed** and a copy is being returned for the following correction(s):

Please complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you **MUST** now provide the FEI number. A Social Security number is not considered to be the same as the FEI number. For FEI number assistance, call the IRS at (800) 829-1040.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/JE  
ANNUAL REPORTS SECTION