2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000027716

Entity Name: HERNANDEZ FLOORING SERVICES INC.

FILED Apr 24, 2006 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
503 ALETA AVE MARY ESTHER, FL 32569				2755 BAY CLUB DR. NAVARRE, FL 32566			
Current Mailing Address:				New Mailing Address:			
503 ALETA AVE MARY ESTHER, FL 32569			2755 BAY CLUB DR. NAVARRE, FL 32566				
FEI Number: 20-2381644 FEI Number Applied For () FEI Num			nber Not Applicable () Certificate of Status Desired (X)				
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
HERNANDEZ, ADAN 503 ALETA AVE MARY ESTHER, FL 32569 US The above named entity submits this statement for the purpose of				HERNANDEZ, ADAN 2755 BAY CLUB DR. NAVARRE, FL 32566 US of changing its registered office or registered agent, or both,			
in the State	of Florida.						
SIGNATUR	E: ADAN HE					(04/24/2006
		c Signature of Registered Agent	•				Date
Election Cam	paign Financing	Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:				${\bf ADDITIONS/CHANGES\ TO\ OFFICERS\ AND\ DIRECTORS:}$			
Title: Name: Address: City-St-Zip:	P () HERNANDEZ, AI 503 ALETA AVE MARY ESTHER,			Title: Name: Address: City-St-Zip:	P (X) HERNANDEZ, A 2755 BAY CLUE NAVARRE, FL	DAN B DR.	() Addition
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	P () HERNANDEZ, A 2755 BAY CLUE NAVARRE, FL	DAN B DR.	(X) Addition
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	HERNANDEZ, A 2755 BAY CLUE	DAN B DR.	(X) Addition
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	P () HERNANDEZ, A 2755 BAY CLUE NAVARRE, FL	DAN 3 DR.	(X) Addition
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	P () HERNANDEZ, A 2755 BAY CLUE NAVARRE, FL	DAN B DR.	(X) Addition
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	P () HERNANDEZ, A 2755 BAY CLUE NAVARRE, FL	DAN B DR.	(X) Addition

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: ADAN HERNANDEZ P 04/24/2006