2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000041883

Entity Name: CRUZ FLOOR COVERING, INC.

FILED Sep 18, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

7986 SANDEL WOOD CIR. W. FT. MYERS, FL 33908

Current Mailing Address: New Mailing Address:

5353 HAWKS LANDING DRIVE SUITE 308 FORT MYERS, FL 33907

FEI Number: 20-2559905 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DA CRUZ, DANIEL D 5353 HAWKS LANDING DRIVE 308 FORT MYERS, FL 33907 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: DANIEL D DA CRUZ

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: () Change () Addition

Name: DA CRUZ, DANIEL D Name:

 Address:
 5353 HAWKS LANDING DRIVE # 308
 Address:

 City-St-Zip:
 FORT MYERS, FL 33907
 City-St-Zip:

Title: VP () Delete Title: () Change () Addition

 Name:
 BATISTA, ROBSON S
 Name:

 Address:
 2723 COLONIAL BLVD # 201
 Address:

 City-St-Zip:
 FORT MYERS, FL 33907
 City-St-Zip:

Title: () Delete Title: D () Change (X) Addition

 Name:
 Name:
 CALAZANS, RONICLEBER

 Address:
 Address:
 5353 HAWKS LANDING DRIVE # 308

 City-St-Zip:
 City-St-Zip:
 FORT MYERS, FL 33907

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: DANIEL D. DA CRUZ P 09/18/2006