2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000041883

Title:

Name:

Address:

City-St-Zip:

(X) Delete

5353 HAWKS LANDING DRIVE # 308

CALAZANS, RONICLEBER

FORT MYERS, FL 33907

FILED Feb 15, 2008 Secretary of State

Entity Nam	ne: CRUZ FLO	OOR COVERING, INC.					
Current Pri	incipal Place	of Business:	New Princ	New Principal Place of Business:			
5215 4TH S LEHIGH AC	T. W. CRES, FL 3397	71					
Current Ma	iling Address	s:	New Maili	New Mailing Address:			
5215 4TH S LEHIGH AC	8T. W. BRES, FL 3397	71					
FEI Number: 2	20-2559905	FEI Number Applied For ()	FEI Number Not Appl	icable ()	Certificate of Status Desired ()		
Name and	Address of C	urrent Registered Agent:	Name and	Address of N	lew Registered Agent:		
308	DANIEL D KS LANDING [RS, FL 33907						
The above r in the State	named entity s of Florida.	ubmits this statement for the p	urpose of changing it	ts registered o	office or registered agent, or be	oth,	
SIGNATUR	E: DANIEL D	A CRUZ					
	Electroni	c Signature of Registered Age	ent		Date		
		(2)(b), F.S., the corporation did no Trust Fund Contribution ().	t receive the prior notic	e.			
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	P () DA CRUZ, DANII 5215 4TH ST. W LEHIGH ACRES		Title: Name: Address: City-St-Zip:	() Change()Addition		
Title: Name: Address: City-St-Zip:	VP () BATISTA, ROBS 2723 COLONIAL FORT MYERS, F	. BLVD # 201	Title: Name: Address: City-St-Zip:	VP (X ALEANDRO, P 5215 4TH ST. V LEHIGH ACRE	N.		

I hereby certify that the information supplied with this filing does not qualify 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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: DANIEL DA CRUZ P 02/15/2008

() Change () Addition