

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2006 8:00 am
Secretary of State

04-28-2006 90182 010 ***150.00

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|--|---|---|--|------------------------------------|--|
| DOCUMENT # P05000064162 1. Entity Name MARTY'S FLOOR-IT, INC. | | | | | |
| Principal Place of Business 6036 RIDGEWAY DRIVE ZEPHYRHILLS, FL 33542 | | | Mailing Address 6036 RIDGEWAY DRIVE ZEPHYRHILLS, FL 33542 | | |
| 2. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country | | 3. Mailing Address Suite, Apt. #, etc. City & State Zip Country | | | |
| 4. FEI Number <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 20-2773586 </div> | | | Applied For <input type="checkbox"/> Not Applicable | | |
| 5. Certificate of Status Desired <input type="checkbox"/> | | | \$8.75 Additional Fee Required | | |
| 6. Name and Address of Current Registered Agent WRIGHT, AMANDA 5243 GALL BLVD SUITE 4 ZEPHYRHILLS, FL 33542 | | | 7. Name and Address of New Registered Agent Name Alan Miles Street Address (P.O. Box Number is Not Acceptable) 6036 Ridgeway Drive City Zephyrhills State FL Zip Code 33542 | | |
| 8. 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 <i>X Alan Miles</i> DATE <i>X 4.11.06</i> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> | | | | | |
| FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 | | 9. Election Campaign Financing 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 NAME STREET ADDRESS CITY-ST-ZIP | P FERRIS, MARTIN J SR. 6036 RIDGEWAY DRIVE ZEPHYRHILLS, FL 33542 | <input type="checkbox"/> Delete | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VP MILES, ALAN A 6036 RIDGEWAY DRIVE ZEPHYRHILLS, FL 33542 | <input type="checkbox"/> Delete | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | SEC MILES, TERRIE L 6036 RIDGEWAY DRIVE ZEPHYRHILLS, FL 33542 | <input type="checkbox"/> Delete | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Delete | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Delete | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Delete | | | |
| 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 like empowered. | | | SIGNATURE: <i>X Terrie Miles</i> Date <i>X 4/11/06</i> Daytime Phone # <i>X 813 782-3516</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> | | |

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