


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2007 8:00 am
Secretary of State

04-19-2007 90204 019 ***158.75

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| DOCUMENT # P05000067424 | |  |
| 1. Entity Name DANA FLOORING CORPORATION | | |

40070858



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| Principal Place of Business 7768 HARBOR BEND CIR ORLANDO, FL 32822 | Mailing Address 7768 HARBOR BEND CIR ORLANDO, FL 32822 |
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|---|---|
| 2. Principal Place of Business - No P.O. Box # 12615 Winding Woods Ln | 3. Mailing Address 12615 Winding Woods Ln |
| Suite, Apt. #, etc. | Suite, Apt. #, etc. |

04142007 Chg-P CR2E034 (12/06)

| | |
|------------------------------------|------------------------------------|
| City & State Orlando, FL | City & State Orlando, FL |
| Zip 32832 | Zip 32832 |
| Country | Country |

4. FEI Number
52-2397873

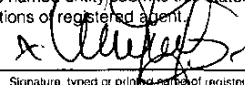
Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

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|---|--|
| 6. Name and Address of Current Registered Agent GONZALEZ, HECTOR D 7768 HARBOR BEND CIR ORLANDO, FL 32822 | |
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| 7. Name and Address of New Registered Agent Name Ana M Barajas Street Address (P.O. Box Number is Not Acceptable) 12615 Winding Woods Ln City Orlando FL Zip Code 32832 | |
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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.

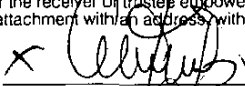
SIGNATURE  DATE **4/14/07**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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| FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees |
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| 10. OFFICERS AND DIRECTORS | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | |
|--|--|---|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D GONZALEZ, HECTOR D 7768 HARBOR BEND CIR ORLANDO, FL 32822 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | Ana M Barajas 12615 Winding Woods Ln Orlando, FL 32832 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS 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 like empowered.

SIGNATURE:  DATE **4/14/07** DAYTIME PHONE # **407-249-0211**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR