

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P05000077946

FILED
Jul 06, 2006
Secretary of State**Entity Name:** FLOOR DESIGN & PRESURE WASH INC.**Current Principal Place of Business:**1219 AUTUMN STREET
PORT CHARLOTTE, FL 33980**New Principal Place of Business:****Current Mailing Address:**1219 AUTUMN STREET
PORT CHARLOTTE, FL 33980**New Mailing Address:****FEI Number:****FEI Number Applied For ()****FEI Number Not Applicable (X)****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**TOVAR-GOMEZ, JAIME
1219 AUTUMN STREET
PORT CHARLOTTE, FL 33980 US**Name and Address of New Registered Agent:**

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: TOVAR-GOMEZ, JAIME
Address: 1219 AUTUMN STREET
City-St-Zip: PORT CHARLOTTE, FL 33980

Title: VP (X) Delete
Name: DIAZ, CLARA I
Address: 1219 AUTUMN STREET
City-St-Zip: PORT CHARLOTTE, FL 33980

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JAIME TOVAR-GOMEZ

PRES

07/06/2006

Electronic Signature of Signing Officer or Director

Date