

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000098410

FILED  
Feb 27, 2007  
Secretary of State

Entity Name: A&C FLOOR CONTRACTOR, INC.

## Current Principal Place of Business:

7301 LAS FLORES CT., APT. 246  
TAMPA, FL 33634

## New Principal Place of Business:

3263 CARLTON ARMS DR  
TAMPA, FL 33614 US

## Current Mailing Address:

7301 LAS FLORES CT., APT. 246  
TAMPA, FL 33634

## New Mailing Address:

3263 CARLTON ARMS DR  
TAMPA, FL 33614 US

FEI Number: 20-3156873

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 US

## Name and Address of New Registered Agent:

CAVALETTI, OSINEI  
3263 CARLTON ARMS DR  
TAMPA, FL 33614 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: OSINEI CVALETTI

02/27/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PSTD ( ) Delete  
Name: CVALETTI, OSINEI  
Address: 7301 LAS FLORES CT., APT. 246  
City-St-Zip: TAMPA, FL 33634

Title: V ( ) Delete  
Name: ARAUJO, WAGNER S  
Address: 7301 LAS FLORES CT., APT. 246  
City-St-Zip: TAMPA, FL 33634

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: CVALETTI, OSINEI  
Address: 3263 CARLTON ARMS DR  
City-St-Zip: TAMPA, FL 33614 US

Title: V (X) Change ( ) Addition  
Name: FERREIRA, JOSE W  
Address: 3263 CARLTON ARMS DR  
City-St-Zip: TAMPA, FL 33614 US

Title: S ( ) Change (X) Addition  
Name: ALVES DOS SANTOS, RONNE  
Address: 3263 CARLTON ARMS DR  
City-St-Zip: TAMPA, FL 33614 US

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: OSINEI CVALETTI

P

02/27/2007

Electronic Signature of Signing Officer or Director

Date