2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000099171

Entity Name: LAMINATE STATE, CORP.

FILED Aug 31, 2006 Secretary of State

Current Principal Place of Busi	ness: New	Principal Place of Bus	siness:
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100 BROOK ST. 1221 SW PARMA AVE

FORT PIERCE, FL 34947 US PORT ST LUCIE, FL 34953 US

Current Mailing Address: New Mailing Address:

100 BROOK ST. 1221 SW PARMA AVE

FORT PIERCE, FL 34947 US PORT ST LUCIE, FL 34953 US

FEI Number: 20-3157129 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

TAXPLACE, CORP. 2721 S. U S 1 SUITE # 9 FORT PIERCE, FL 34982 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:

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: D (X) Change () Addition

Name:SANTOS, FLAVIO GName:SANTOS, FLAVIO GAddress:100 BROOK ST.Address:1221 SW PARMA AVE

City-St-Zip: FORT PIERCE, FL 34947 US City-St-Zip: PORT ST LUCIE, FL 34953 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: FLAVIO SANTOS P 08/31/2006