2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000106165

Entity Name: CARPANEZ FLOOR COVERING, INC.

FILED Jan 11, 2008 Secretary of State

Current Principal Place of Busi	ness: New	Principal Place of Bus	siness:
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909 ALASKA AVE. 2116 EARL RD

LEHIGH ACRES, FL 33971 FORT MYERS, FL 33901

Current Mailing Address: New Mailing Address:

909 ALASKA AVE. 2116 EARL RD

LEHIGH ACRES, FL 33971 FORT MYERS, FL 33901

FEI Number: 20-3245036 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:

DESPACHANTE BRASILEIRO LLC
3800 FOWLER ST

METRO BUSINESS SOLUTIONS, INC
3940 METRO PKWY

SUITE 3 105

FORT MYERS, FL 33907 US FORT MYERS, FL 33916 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: METRO BUSINESS SOLUTIONS 01/11/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition Name: DUTRA, ELINTON Name: DUTRA, ELINTON

 Address:
 909 ALASKA AVE.
 Address:
 2116 EARL RD

 City-St-Zip:
 LEHIGH ACRES, FL 33971
 City-St-Zip:
 FORT MYERS, FL 33901

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

 Name:
 DE SOUZA, JOSE FRANCISCO
 Name:
 ALMEIDA, DANILLO G

 Address:
 909 ALASKA AVE
 Address:
 2929 WINKLER AVE

 City-St-Zip:
 LEHIGH ACRES, FL 33971
 City-St-Zip:
 FORT MYERS, FL 33916

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

Name: DE SOUZA MIRANDA, RONI P Name: LUCIO, ANDERSON P

Address: 909 ALASKA AVE. Address: 3704 BROADWAY STREET APT 119B

City-St-Zip: LEHIGH ACRES, FL 33971 City-St-Zip: FORT MYERS, FL 33901

I hereby certify that the information supplied with this filing does not qualify 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: ELINTON DUTRA P 01/11/2008