2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000109788

Entity Name: GNJ FLOOR COVERING, INC.

FILED May 01, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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2709 SWAMP CABBAGE CT. 3207 BROADWAY AVE FORT MYERS, FL 33901 FORT MYERS, FL 33901

Current Mailing Address: New Mailing Address:

2709 SWAMP CABBAGE CT. 3207 BROADWAY AVE FORT MYERS, FL 33901 FORT MYERS, FL 33901

FEI Number: 20-3282213 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:

ROSA, GERALDO R
12561 EQUESTRIAN CIRCLE
FORT MYERS, FL 33907 US

ROSA, GERALDO R
3207 BROADWAY AVE
FORT MYERS, FL 33901 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: 05/01/2006

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: PTD () Delete Title: PTD (X) Change () Addition Name: ROSA, GERALDO R Name: ROSA, GERALDO R Address: 12561 EQUESTRIAN CIRCLE Address: 3207 BROADWAY AVE

 Address:
 12561 EQUESTRIAN CIRCLE
 Address:
 3207 BROADWAY AVE

 City-St-Zip:
 FORT MYERS, FL 33907
 City-St-Zip:
 FORT MYERS, FL 33901

Title: VPD () Delete Title: VPD (X) Change () Addition Name: PEREIRA FILHO, JOSE Name: PEREIRA, VALDENI L

Name:PEREIRA FILHO, JOSEName:PEREIRA, VALDENI LAddress:12561 EQUESTRIAN CIRCLEAddress:3207 BROADWAY AVECity-St-Zip:FORT MYERS, FL 33907City-St-Zip:FORT MYERS, FL 33901

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

 Name:
 BORA, NILSON O
 Name:
 DOS SANTOS, JOSE ANTONIO P

Address: 12561 EQUESTRIAN CIRCLE Address: 3207 BROADWAY AVE
City-St-Zip: FORT MYERS, FL 33907 City-St-Zip: FORT MYERS, FL 33901

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: ROSA, GERALDO R PTD 05/01/2006