2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000111476

Address:

City-St-Zip:

436 CONLEE

LEHIGH ACRES, FL 33936

Entity Name: MENENDEZ FLOORING, INC

FILED Apr 19, 2006 Secretary of State

Current B	rinainal Blac	o of Business	New Bringing Place	of Business	
Current	rincipai Piac	e of Business:	New Principal Place	or Business:	
436 CONL LEHIGH A	.EE CRES, FL 33	936			
Current Mailing Address:			New Mailing Address:		
436 CONL LEHIGH A	.EE CRES, FL 33	936			
FEI Number	: 65-1258081	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:		
436 CONL	EZ, MELISSA .EE CRES, FL 33	936 US			
	named entity e of Florida.	submits this statement for the	ourpose of changing its registere	d office or registered agent, or both,	
SIGNATU	RE:				
	Electro	nic Signature of Registered Ag	ent	Date	
Election Car	mpaign Financii	ng Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	
Title: Name: Address: City-St-Zip:	P (MENENDEZ, 0 436 CONLEE LEHIGH ACRE		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP (MENENDEZ, I 436 CONLEE LEHIGH ACRE		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SEC (MENENDEZ, I 436 CONLEE LEHIGH ACRE		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	TRES (MENENDEZ. I) Delete MELISSA	Title: Name:	() Change () Addition	

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.

Address:

City-St-Zip:

SIGNATURE: MELISSA MENENDEZ VP 04/19/2006