

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P05000123910

Entity Name: DIMENSION FLOORING, INC.

FILED
Sep 17, 2008
Secretary of State**Current Principal Place of Business:**4333 SILVER STAR RD.
SUITE #130
ORLANDO, FL 32808**New Principal Place of Business:****Current Mailing Address:**4333 SILVER STAR RD.
SUITE #130
ORLANDO, FL 32808**New Mailing Address:**

FEI Number: 20-3447003

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:SANCHEZ, WILLIAM
1742 DELAFIELD DRIVE
WINTER GARDEN, FL 34787 US**Name and Address of New Registered Agent:**

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

OFFICERS AND DIRECTORS:Title: P () Delete
Name: SANCHEZ, WILLIAM
Address: 1742 DELAFIELD DRIVE
City-St-Zip: WINTER GARDEN, FL 34787Title: VP () Delete
Name: VARGAS, HECTOR F
Address: 1736 DELAFIELD DRIVE
City-St-Zip: WINTER GARDEN, FL 34787Title: () Delete
Name:
Address:
City-St-Zip:Title: () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: VPT (X) Change () Addition
Name: VARGAS, HECTOR F
Address: 1736 DELAFIELD DRIVE
City-St-Zip: WINTER GARDEN, FL 34787Title: VP () Change (X) Addition
Name: GONCALVEZ, VANDERLEI
Address: 1552 GLENWICK DR
City-St-Zip: WINDERMERE, FL 34786Title: SEC () Change (X) Addition
Name: GONCALVEZ, ROSELINE
Address: 1552 GLENWICK DR
City-St-Zip: WINDERMERE, FL 34786

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: HECTOR VARGAS

VP

09/17/2008

Electronic Signature of Signing Officer or Director

Date