

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000127971

Entity Name: M & E FLOOR COVERING, INC.

FILED
Apr 30, 2006
Secretary of State

Current Principal Place of Business:

12740 EQUESTRIAN CIRCLE
#2903
FORT MYERS, FL 33907

Current Mailing Address:

12740 EQUESTRIAN CIRCLE
#2903
FORT MYERS, FL 33907

New Principal Place of Business:

4299 BELLASOL CR
#2614
FORT MYERS, FL 33916 US

New Mailing Address:

4299 BELLASOL CR
#2614
FORT MYERS, FL 33916 US

FEI Number: 20-3490716

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DA SILVA, MARCELA
12740 EQUESTRIAN CIRCLE
#2903
FORT MYERS, FL 33907 US

Name and Address of New Registered Agent:

DA SILVA, MARCELA
4299 BELLASOL CIRCLE
#2614
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:

04/30/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DA SILVA, MARCELA
Address: 12740 EQUESTRIAN CIRCLE #2903
City-St-Zip: FORT MYERS, FL 33907

Title: VP () Delete
Name: MENDES, ELIADE
Address: 12740 EQUESTRIAN CIRCLE #2903
City-St-Zip: FORT MYERS, FL 33907

Title: S () Delete
Name: DA COSTA, JOSE
Address: 12740 EQUESTRIAN CIRCLE #2903
City-St-Zip: FORT MYERS, FL 33907

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: DA SILVA, MARCELA
Address: 4299 BELLASOL CR, #2614
City-St-Zip: FORT MYERS, FL 33916

Title: VP (X) Change () Addition
Name: MENDES, ELIADE
Address: 4299 BELLASOL CR, #2614
City-St-Zip: FORT MYERS, FL 33916

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: MARCELA DA SILVA

P

04/30/2006

Electronic Signature of Signing Officer or Director

Date