

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000133225

FILED
Sep 20, 2006
Secretary of State

Entity Name: SUCCESS FLOORING, INC.

Current Principal Place of Business:

8480 VILLAGE EDGE CIRCLE #4
FORT MYERS, FL 33919

New Principal Place of Business:

5315 SUMMERLIN RD
#02
FORT MYERS, FL 33919

Current Mailing Address:

8480 VILLAGE EDGE CIRCLE #4
FORT MYERS, FL 33919

New Mailing Address:

5315 SUMMERLIN RD
#02
FORT MYERS, FL 33919

FEI Number: 20-3552200

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TAX HOUSE CORPORATION
1261 E SAMPLE RD
POMPANO BEACH, FL 33064 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: TAX HOUSE CORPORATION

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:

Title: PD () Delete
Name: DE SOUZA, ELTON H
Address: 8480 VILLAGE EDGE CIRCLE #4
City-St-Zip: FORT MYERS, FL 33919

Title: DVP (X) Delete
Name: DE ARAUJO, ALDENIR D
Address: 8480 VILLAGE EDGE CIRCLE #4
City-St-Zip: FORT MYERS, FL 33919

Title: D (X) Delete
Name: PEREIRA, CLERISMAR A
Address: 8480 VILLAGE EDGE CIRCLE #4
City-St-Zip: FORT MYERS, FL 33919

Title: S (X) Delete
Name: SVENDSBO, MIRIAN
Address: 8480 VILLAGE EDGE CIRCLE #4
City-St-Zip: FORT MYERS, FL 33919

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: DE SOUZA, ELTON H
Address: 5315 SUMMERLIN RD #02
City-St-Zip: FORT MYERS, FL 33919

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

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

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: ELTON H DE SOUZA

Electronic Signature of Signing Officer or Director

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09/20/2006

Date