

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000140522

FILED
May 01, 2007
Secretary of State

Entity Name: CUSTOM FLOORING OF TAMPA, INC.

Current Principal Place of Business:

7221 N HIMES AVE
TAMPA, FL 33614 US

New Principal Place of Business:

4516 W NORTH ST
TAMPA, FL 33614 US

Current Mailing Address:

7221 N HIMES AVE
TAMPA, FL 33614 US

New Mailing Address:

4516 W NORTH ST
TAMPA, FL 33614 US

FEI Number: 20-3673989

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GONZALEZ, OSMAR
7221 N HIMES AVE
TAMPA, FL 33614 US

Name and Address of New Registered Agent:

GONZALEZ, OSMAR
4516 W NORTH ST
TAMPA, FL 33614 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: OSMAR GONZALEZ

05/01/2007

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: P () Delete
Name: GONZALEZ, OSMAR
Address: 7221 N HIMES AVE
City-St-Zip: TAMPA, FL 33614 US

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GONZALEZ, OSMAR
Address: 4516 W NORTH ST
City-St-Zip: TAMPA, FL 33614 US

Title: VP () Change (X) Addition
Name: GARCIA, SERVANDO
Address: 8902 N TAMPA ST
City-St-Zip: TAMPA, FL 33604

Title: OFF () Change (X) Addition
Name: DE LA ROSA, ANGEL
Address: 8902 N TAMPA ST
City-St-Zip: TAMPA, FL 33604

Title: OFF () Change (X) Addition
Name: VIAMONTES, YURI
Address: 8902 N TAMPA ST
City-St-Zip: TAMPA, FL 33604

Title: OF () Change (X) Addition
Name: LEIVA, JOSE
Address: 27753 BREAKERS DR
City-St-Zip: WESLEY CHAPEL, FL 33543

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: OSMAR GONZALEZ

P

05/01/2007

Electronic Signature of Signing Officer or Director

Date