2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000146845

Entity Name: PROJECTFLOOR OF AMERICA CORP

FILED Jul 17, 2007 Secretary of State

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Current Principal Place of Business:				New Principal Place of Business:			
5950 LAKEHURST DRIVE SUITE 169 ORLANDO, FL 32819				5950 LAKEHURST DRIVE SUITE 176 ORLANDO, FL 32819 US			
Current Mailing Address:				New Mailing Address:			
5950 LAKEHURST DRIVE SUITE 169 ORLANDO, FL 32819				5950 LAKEHURST DRIVE SUITE 176 ORLANDO, FL 32819 US			
FEI Number:	20-3731716	FEI Number Applied For	() FEI Nui	mber Not Appl	icable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
NEW LIFE PROFESSIONAL SERVICES 5950 LAKEHURST DR SUITE 215 ORLANDO, FL 32819 US				LARSON, CAROLINE 8818 COMMODITY CR SUITE 40 ORLANDO, FL 32819 US			
The above in the State		submits this statement f	or the purpose o	of changing i	ts registered	office or registered agent, or both,	
SIGNATURE: CAROLINE LARSON				07/17/2007			
	Electro	nic Signature of Registe	red Agent			Date	
		3(2)(b), F.S., the corporation (g Trust Fund Contribution (the prior notic	e.		
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS			
Title: Name: Address: City-St-Zip:	CAPASSO, VA RUA DA INDEF) Delete LERIA P PENDENCIA 793/839 CAMBU P 01524-001 BR	CI	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	CAPASSO, IVO RUA DA INDEF) Delete) RICARDO PENDENCIA 793/839 CAMBU SP 01524-001 BR	CI	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DOS SANTOS, RUA DA INDEF) Delete FERNANDO P PENDENCIA 793/839 CAMBU SP 01524-001 BR	CI	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	DS () Delete		Title:	DS ()	() Change () Addition	

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.

Name:

Address:

City-St-Zip:

ARAUJO, JOSÉ F

741 SAXBY AVE

ORLANDO, FL 32835 FL

SIGNATURE: VALERIA P CAPASSO P 07/17/2007

CASTANHO, VANDERLEI S

SAO PAULO, SP 01524-001 BR

RUA DA INDEPENDENCIA 793/839 CAMBUCI

Name:

Address:

City-St-Zip: