2007 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 17, 2007 8:00 am Secretary of State DOCUMENT # P05000166124 04-17-2007 90239 006 ***150.00 DANIEL R. PEREZ FLOORING, INC. Principal Place of Business Mailing Address 918 GRACE AVENUE 918 GRACE AVENUE LAKE WORTH, FL 33461 LAKE WORTH, FL 33461 2. Principal Place of Business - No P.O. Box # Mailing Address 918 GRACE DUE 918 GRACE AUE Suite, Apt. #, etc Suite, Apt. #, etc 03262007 Chg-P CR2E034 (12/06) Çity & State 4. FEI Number Applied For City & State LAKE WORTH, FI AKE WORTH, FI 20-3989914 Not Applicable Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent PEREZ, DANIEL R Street Address (P.O. Box Number is Not Acceptable) 918 GRACE AVENUE LAKE WORTH, FL 33461 Zip Code FL 8. 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 | 1 am familiar with, and accept the obligations of registered agent SIGNATURE (NOTE: Registeri d'Agent signature required when reinstalling) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. ☐ Change Addition ☐ Delete TITLE TITLE PEREZ, DANIEL R NAME NAME STREET ADDRESS 918 GRACE AVENUE STREET ADDRESS LAKE WORTH, FL 33461 CITY ST ZIP CITY-ST-ZIP ☐ Addition TITLE ☐ Delete TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY-ST-ZIP ☐ Change Delete TITLE ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST-ZIP CLTY - ST - ZIP ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY ST ZIP CITY - ST- ZIP ☐ Change ☐ Addition ☐ Delete THILE TITLE NAM NAME STREET ADDRESS STREET ADDRESS COY-ST ZIP CITY-ST-ZIP ☐ Change ☐ Addition □ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY ST ZIP CITY-ST-ZIP 12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 empreyered to execute this report as required by Chapter 607. Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with appaddrey. With all other like empowered.

DANIELR PEREZ

SIGNATURE:

4/9/07 (561) 969-9757
Date Sayling Phono R