2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Oct 08, 2007
Secretary of State

DOCUMENT# P06000010330

Entity Name: NAPLES EXPERT FLOORING INC

Current Principal Place of Business:

16121 CALDERA LANE
NAPLES, FL 34110 US

New Principal Place of Business:

Current Mailing Address:

16121 CALDERA LANE
NAPLES, FL 34110 US

New Mailing Address:

FEI Number: 72-1610124 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SPAHIU, MISENA
16121 CALDERA LANE
NAPLES, FL FL 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: _____

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete
Name: SPAHIU, MISENA
Address: 16121 CALDERA LANE
City-St-Zip: NAPLES, FL 34110 US

Title: VPD ( ) Delete
Name: BRACE, NIGERT
Address: 16121 CALDERA LANE
City-St-Zip: NAPLES, FL 34110 US

Title: SD ( ) Delete
Name: FRASHERI, EDRIT
Address: 16274 RAVINA WAY
City-St-Zip: NAPLES, FL 34110 US

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: PD (X) Change ( ) Addition
Name: SPAHIU, MISENA
Address: 16121 CALDERA LANE
City-St-Zip: NAPLES, FL 34110 US

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

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

Title: CEOD ( ) Change (X) Addition
Name: SPAHIU, BERNARD
Address: 16121 CALDERA LANE
City-St-Zip: NAPLES, FL 34110

Title: TD ( ) Change (X) Addition
Name: BRACE, NESIM
Address: 16121 CALDERA LANE
City-St-Zip: NAPLES, FL 34110

Title: D ( ) Change (X) Addition
Name: ARQIMANDRITI, OLSI
Address: 2161 MARIGOLD WAY
City-St-Zip: NAPLES, FL 34109

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: MISENA SPAHIU P 10/08/2007

Electronic Signature of Signing Officer or Director Date