2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 12, 2009
Secretary of State

DOCUMENT# P06000030402

Entity Name: ABEL'S FLOORS CORP.

Current Principal Place of Business:

8905 RICHFIELD CT.
TAMPA, FL 33634

New Principal Place of Business:

Current Mailing Address:

8905 RICHFIELD CT.
TAMPA, FL 33634

New Mailing Address:

FEI Number: 90-0290040 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RAVASOLLI, ABEL
8905 RICHFIELD CT.
TAMPA, FL 33634 US

Name and Address of New Registered Agent:

RAVAZOLLI, ABEL
8905 RICHFIELD CT.
TAMPA, FL 33634 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: ABEL RAVAZOLLI 01/12/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: RAVASOLLI, ABEL
Address: 8905 RICHFIELD CT.
City-St-Zip: TAMPA, FL 33634

Title: VP ( ) Delete
Name: DORNELAS, GILBERTO F
Address: 4703 KEMBLE CT
City-St-Zip: TAMPA, FL 33624

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: RAVAZOLLI, ABEL
Address: 8905 RICHFIELD CT.
City-St-Zip: TAMPA, FL 33634

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

Title: VP ( ) Change (X) Addition
Name: RAVAZOLLI, AMARILDO
Address: 8905 RICHFIELD CT.
City-St-Zip: TAMPA, FL 33634

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: ABEL RAVAZOLLI P 01/12/2009
Electronic Signature of Signing Officer or Director Date