2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000051894

Entity Name: DARDANELLOS FLOOR COVERING, INC

FILED Apr 07, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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209 4TH ST, APT B 321 DE LA RONDE DR FORT MYERS, FL 33907 CHALMETTE, LA 70043

Current Mailing Address: New Mailing Address:

209 4TH ST, APT B 321 DE LA RONDE DR FORT MYERS, FL 33907 CHALMETTE, LA 70043

FEI Number: 65-1273830 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

YATROFSKY, JASON

3651 WINKLER AVE. EXTENSION

1100 S FEDERAL HWY

1633

2ND FLOOR

FORT MYERS, FL 33916 US

DEERFIELD BEACH, FL 33441 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: JASON YATROFSKY 04/07/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition Name: YATROFSKY, ALCIONE L Name: YATROFSKY, ALCIONE L

Address: 3651 WINKLER AVE. EXTENSION # 1633 Address: 321 DE LA RONDE DR
City-St-Zip: FORT MYERS, FL 33916 City-St-Zip: CHALMETTE, LA 70043

Title: VP () Delete Title: VP (X) Change () Addition

 Name:
 YATROFSKY, JASON
 Name:
 YATROFSKY, JASON

 Address:
 3651 WINKLER AVE. EXTENSION # 1633
 Address:
 321 DE LA RONDE DR

 City-St-Zip:
 FORT MYERS, FL 33916
 City-St-Zip:
 CHALMETTE, LA 70043

Title: D (X) Delete Title: () Change () Addition

 Name:
 TOLENTINO, MARCELO
 Name:

 Address:
 3651 WINKLER AVE. EXTENSION # 1633
 Address:

 City-St-Zip:
 FORT MYERS, FL 33916
 City-St-Zip:

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: ALCIONE L YATROFSKY P 04/07/2008