## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000064925

Entity Name: PORTILLOS FLOORING, CORP

FILED Apr 25, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

740 DON QUIXOTE AVE - APT A 5864 DIEGO ST APT. B ORLANDO, FL 32807 ORLANDO, FL 32807

Current Mailing Address: New Mailing Address:

740 DON QUIXOTE AVE - APT A 5864 DIEGO ST APT. B ORLANDO, FL 32807 ORLANDO, FL 32807

FEI Number: 20-4849107 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:

PORTILLO RAMOS, LUIS A
740 DON QUIXOTE AVE - APT A
ORLANDO, FL 32807 US
PORTILLO RAMOS, LUIS A
5864 DIEGO ST APT. B
ORLANDO, FL 32807 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: LUIS A PORTILLO RAMOS 04/25/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

 Title:
 P
 ( ) Delete

 Name:
 PORTILLO RAMOS, LUIS A

 Address:
 740 DON QUIXOTE AVE - APT A

City-St-Zip: ORLANDO, FL 32807

 Title:
 VP
 ( ) Delete

 Name:
 TOBIAS, ELEUTERIO F

 Address:
 740 DON QUIXOTE AVE - APT A

City-St-Zip: ORLANDO, FL 32807

City-St-Zip:

Title: D ( ) Delete
Name: TOBIAS, SALVADOR F

Address: 740 DON QUIXOTE AVE - APT. A

ORLANDO, FL 32807

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PORTILLO RAMOS, LUIS A
Address: 5864 DIEGO ST APT. B
City-St-Zip: ORLANDO, FL 32807

Title: VP (X) Change ( ) Addition

Name: TOBIAS, ELEUTERIO F Address: 5864 DIEGO ST APT. B City-St-Zip: ORLANDO, FL 32807

Title: D (X) Change ( ) Addition

Name: TOBIAS, SALVADOR F Address: 5864 DIEGO ST APT. B City-St-Zip: ORLANDO, FL 32807

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: LUIS A PORTILLO RAMOS PD 04/25/2008