

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2007 8:00 am
Secretary of State

02-12-2007 90072 042 ***150.00

DOCUMENT # P06000067075

1. Entity Name
AATRE FLOORING INC.



Principal Place of Business
1803 FRANK STREET
~~ORLANDO, FL 32820~~

Mailing Address
1803 FRANK STREET
~~ORLANDO, FL 32820~~

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

296 NE Port Malabar Blvd.
Palm Bay, FL 32905

296 NE Port Malabar Blvd.
Palm Bay, FL 32905

0426**007

Chg-P

CR2E034 (12/06)

4. FEI Number

33-1138370

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

DIAZ, NORA
275 N.E. FOUR STREET
WEBSTER, FL 33597

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P ☐ Delete
NAME RAMOS, ERNESTO J
STREET ADDRESS ~~1803 FRANK STREET~~
CITY-ST-ZIP ~~ORLANDO, FL 32820~~

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE 296 NE Port Malabar Blvd. ☒ Change ☐ Addition
NAME
STREET ADDRESS Palm Bay, FL 32905
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

12. I hereby 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 empowered 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 an address, with all other like empowered.

SIGNATURE: x *Ernesto Ramos* ERNESTO RAMOS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

P 4-26-07 321-952-4957

ATTACHMENT

66012481

#060000067075

ERNESTO RAMOS CARMEN RAMOS 1800 Fifth Street Orlando, FL 32805		40013533 2/5/07	2033
Pay to the Order of <u>Division of Corporations</u>		\$ 150.00	
<u>One hundred Fifty 00/100</u>		000000150007	
WACHOVIA WACHOVIA BANK, N.A. Member FDIC		000000150007	
REF#0552999130 PAID 2/14 150.00		000000150007	

33-1138370

WACHOVIA BANK, N.A., CLERMONT