## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

### DOCUMENT# P06000122847

Entity Name: LEE FLOOR COVERING, INC.

### FILED Jun 13, 2007 Secretary of State

Current Principa	al Place of Business:	New Principal Place of Business:

699 BELL BLVD 512 TUTLE AVE

LEHIGH ACRES, FL 33936 US SARASOTA, FL 34237 US

Current Mailing Address: New Mailing Address:

699 BELL BLVD 512 TUTLE AVE

LEHIGH ACRES, FL 33936 US SARASOTA, FL 34237 US

FEI Number: 20-3567353 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:

DA SILVA, WILSON METRO BUSINESS SOLUTIONS, INC

699 BELL BLVD 3940 METRO PKWY

LEHIGH ACRES, FL 33936 US 105 FORT MYERS, FL 33916 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: METRO BUSINESS SOLUTIONS 06/13/2007

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ( ).

# OFFICERS AND DIRECTORS:

#### ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Name:DA SILVA, WILSONName:BRADY, CARLOS JAddress:699 BELL BLVDAddress:2541 SW 11ST PL

City-St-Zip: LEHIGH ACRES, FL 33936 US City-St-Zip: CAPE CORAL, FL 33914 US

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

 Name:
 DOS SANTOS, HUGO G
 Name:
 DASILVA, WILSON

 Address:
 699 BELL BLVD
 Address:
 699 BELL BLVD

City-St-Zip: LEHIGH ACRES, FL 33936 US City-St-Zip: LEHIGH ACRES, FL 33936 US

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

 Name:
 Name:
 DOS SANTOS, HUGO G

 Address:
 699 BELL BLVD

City-St-Zip: City-St-Zip: LEHIGH ACRES, FL 33936

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: CARLOS J. BRADY P 06/13/2007