2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000001269

Entity Name: JOSUE CARPET SERVICES CORP.

FILED May 15, 2009 Secretary of State

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

1931 A SOUTH FERN CREEK AVE 1612 JESSAMINE AVE ORLANDO, FL 32806 ORLANDO, FL 32806

Current Mailing Address: New Mailing Address:

1931 A SOUTH FERN CREEK AVE 1612 JESSAMINE AVE ORLANDO, FL 32806 ORLANDO, FL 32806

FEI Number: 20-8158827 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:

L.L. PROFESSIONAL SERVICES, INC.

7661 CURRENCY DRIVE

ORLANDO, FL 32809 US

ELISEO MENDOZA

1612 JESSAMINE AVE

ORLANDO, FL 32809 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: JOSUE MENDOZA 05/15/2009

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:
 SANTIAGO, MILITZA
 Name:
 JOSUE, MENDOZA

 Address:
 1931 A SOUTH FERN CREEK AVE
 Address:
 1612 JESSAMINE AVE

City-St-Zip: ORLANDO, FL 32806 City-St-Zip: ORLANDO, FL 32806

Title: VΡ Title: VΡ (X) Change () Addition () Delete MENDOZA, JOSUE Name: Name: MENDOZA, ELISEO 1612 JESSAMINE AVE 1612 JESSAMINE AVE Address: Address: ORLANDO, FL 32806 ORLANDO, FL 32806 City-St-Zip: City-St-Zip:

Title: Title: () Delete (X) Change () Addition MENDOZA, ELISEO Name: MENDOZA LOMELI, ELISEO Name: 1612 JESSAMINE AVE 1612 JESSAMINE AVE Address: Address: City-St-Zip: ORLANDO, FL 32806 City-St-Zip: ORLANDO, FL 32806

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: ELISEO MENDOZA PD 05/15/2009