

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000027149

FILED  
Aug 07, 2008  
Secretary of State

Entity Name: SAINT CARPET CORP

**Current Principal Place of Business:**

2961SETTLERS TRL  
SAINT CLOUD, FL 34772 US

**New Principal Place of Business:**

**Current Mailing Address:**

2961SETTLERS TRL  
SAINT CLOUD, FL 34772 US

**New Mailing Address:**

FEI Number: 33-1154531      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

AMADOR, SANTOS S  
2961SETTLERS TRL  
SAINT CLOUD, FL 34772 US

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

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:

\_\_\_\_\_  
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:**

Title: P ( ) Delete  
Name: AMADOR, SANTOS S  
Address: 2961SETTLERS TRL  
City-St-Zip: SAINT CLOUD, FL 34772 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP ( ) Change (X) Addition  
Name: HERNANDEZ, RICHARD  
Address: 3001 N.W. 106 CALLE  
City-St-Zip: MIAMI, FL 33147 US

Title: SEC ( ) Change (X) Addition  
Name: FLORES, NAHUM  
Address: 11057 NW 3RD TERRA  
City-St-Zip: MIAMI, FL 33172 US

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: SANTOS S. AMADOR

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

P

08/07/2008

\_\_\_\_\_  
Date