2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000032381

Entity Name: MICHAEL'S CARPET & VINYL, INC.

FILED May 01, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
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 1019 SR 17 NORTH
 2019 MOSS OAK LANE

 SEBRING, FL 33870
 SEBRING, FL 33870

Current Mailing Address: New Mailing Address:

 1019 SR 17 NORTH
 2019 MOSS OAK LANE

 SEBRING, FL 33870
 SEBRING, FL 33870

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

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

COBLE, MICHAEL

1019 SR 17 NORTH

SEBRING, FL 33870 US

COBLE, MICHAEL

2019 MOSS OAK LANE

SEBRING, FL 33870 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: MICHAEL COBLE 05/01/2008

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

 Name:
 COBLE, MICHAEL
 Name:
 COBLE, MICHAEL

 Address:
 1019 SR 17 NORTH
 Address:
 2019 MOSS OAK LANE

 Address:
 1019 SR 17 NORTH
 Address:
 2019 MOSS OAK LAN

 City-St-Zip:
 SEBRING, FL 33870
 City-St-Zip:
 SEBRING, FL 33870

 Title:
 TD
 () Delete
 Title:
 () Change () Addition

 Name:
 BELL, ALBERT
 Name:

 Address:
 217 DOUGLAS AVENUE
 Address:

 City-St-Zip:
 SEBRING, FL 33871
 City-St-Zip:

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: MICHAEL COBLE PD 05/01/2008