



2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 13, 2008 8:00 am
Secretary of State

02-13-2008 90028 042 ***158.75

DOCUMENT # P07000058962 1. Entity Name EMERALD CARPET AND TILE OF MELBOURNE, INC.																													
Principal Place of Business 495 STAN DRIVE SUITE # 106 MELBOURNE, FL 32904 US			Mailing Address 495 STAN DRIVE SUITE # 106 MELBOURNE, FL 32904 US																										
2. Principal Place of Business - No P.O. Box # 18302 RIVER OAKS DR		3. Mailing Address 18302 RIVER OAKS DR																											
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 		01232008 Chg-P CR2E034 (12/06)																									
City & State JUPITER FL		City & State JUPITER FL		4. FEI Number 26-0178005																									
Zip 33458		Country USA		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required																									
6. Name and Address of Current Registered Agent KERNAGHAN, MICHAEL 18302 RIVER OAKS DR JUPITER, FL 33458				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>																									
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: <u><i>M. Kernaghan</i></u> DATE: <u>2-11-08</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>																													
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																										
<div style="display: flex;"> <div style="flex: 1;"> 10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">TITLE</td> <td style="width: 40%;">P,S</td> <td style="width: 30%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>KERNAGHAN, MICHAEL</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>18302 RIVER OAKS DR</td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td>JUPITER, FL 33458</td> <td></td> </tr> </table> </div> <div style="flex: 1;"> 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">TITLE</td> <td style="width: 40%;"></td> <td style="width: 30%; text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td></td> <td></td> </tr> </table> </div> </div>						TITLE	P,S	<input type="checkbox"/> Delete	NAME	KERNAGHAN, MICHAEL		STREET ADDRESS	18302 RIVER OAKS DR		CITY - ST - ZIP	JUPITER, FL 33458		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME			STREET ADDRESS			CITY - ST - ZIP		
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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: <u><i>M. Kernaghan</i></u> <u>MICHAEL KERNAGHAN</u> 2-11-08 561-747-6780 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>																													