

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED
Jul 06, 2009
Secretary of State**

DOCUMENT# P07000066735

Entity Name: F & S FLOORS INC

Current Principal Place of Business:

66 PINE TRACE LOOP
OCALA, FL 34472 US

New Principal Place of Business:

Current Mailing Address:

66 PINE TRACE LOOP
OCALA, FL 34472 US

New Mailing Address:

FEI Number: 26-0304342 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RODRIGUEZ, FELIPE
66 PINE TRACE LOOP
OCALA, FL 34472 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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: RODRIGUEZ, FELIPE
Address: 66 PINE TRACE LOOP
City-St-Zip: OCALA, FL 34472 US

Title: S D () Delete
Name: RODRIGUEZ, STEPHANIE
Address: 66 PINE TRACE LOOP
City-St-Zip: OCALA, FL 34472 US

Title: VP D (X) Delete
Name: DELOIVEIRA, BENTO P
Address: 900 LEE STREET
City-St-Zip: WILDWOOD, FL 34785 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: () Change () Addition
Name:
Address:
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: FELIPE RODRIGUEZ

PRES

07/06/2009

Electronic Signature of Signing Officer or Director

Date