

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000099266

Entity Name: FLOORS RESTORED, INC.

FILED  
Feb 26, 2009  
Secretary of State

## Current Principal Place of Business:

4195 TAMIAMI TRAIL SOUTH  
VENICE, FL 34293

## New Principal Place of Business:

14251 TAMIAMI TRAIL  
NORTH PORT, FL 34287

## Current Mailing Address:

4195 TAMIAMI TRAIL SOUTH  
VENICE, FL 34293

## New Mailing Address:

14251 TAMIAMI TRAIL  
NORTH PORT, FL 34287

FEI Number: 56-2677041

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GOLDMAN, LOU  
4195 TAMIAMI TRAIL SOUTH  
VENICE, FL 34293 US

## Name and Address of New Registered Agent:

GOLDMAN, LOU  
14251 TAMIAMI TRAIL  
NORTH PORT, FL 34287 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: LOU GOLDMAN

02/26/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: GOLDMAN, LOU  
Address: 4195 TAMIAMI TRAIL SOUTH  
City-St-Zip: VENICE, FL 34293

Title: D ( ) Delete  
Name: PROVENZANO, FRANK E  
Address: 4195 TAMIAMI TRAIL SOUTH  
City-St-Zip: VENICE, FL 34293

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: GOLDMAN, LOU  
Address: 14251 TAMIAMI TRAIL  
City-St-Zip: NORTH PORT, FL 34287

Title: D (X) Change ( ) Addition  
Name: PROVENZANO, FRANK E  
Address: 14251 TAMIAMI TRAIL  
City-St-Zip: NORTH PORT, FL 34287

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: FRANK PROVENZANO

VP

02/26/2009

Electronic Signature of Signing Officer or Director

Date