

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P07000134790

FILED
Jun 02, 2009
Secretary of State**Entity Name:** AGUILAR FLOORING, CORP.**Current Principal Place of Business:**207 W 65TH STREET
#101
HIALEAH, FL 33012**New Principal Place of Business:****Current Mailing Address:**207 W 65TH STREET
#101
HIALEAH, FL 33012**New Mailing Address:****FEI Number:** 26-1641560**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**SOZA, KAREN
207 W 65TH. STREET
#101
HIALEAH, FL 33012 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:** P () Delete
Name: SOZA, KAREN
Address: 207 WEST 65TH ST #101
City-St-Zip: HIALEAH, FL 33012**Title:** V () Delete
Name: AGUILAR, CARLOS
Address: 207 WEST 65TH ST #101
City-St-Zip: HIALEAH, FL 33012**Title:** () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** S () Change (X) Addition
Name: GOMEZ, EDWIN
Address: 2453 NW 33RD ST
City-St-Zip: MIAMI, FL 33142

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: KAREN SOZA

P

06/02/2009

Electronic Signature of Signing Officer or Director_____
Date