

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jul 28, 2008 8:00 am**  
**Secretary of State**

07-28-2008 90030 047 \*\*\*150.00

**60045454**



07242008 Chg-P CR2E034 (12/06)

<b>DOCUMENT # P07000135027</b> 1. Entity Name <b>DELORETO FLOORING INC.</b>			
Principal Place of Business 4465 12TH MANOR S.W. VERO BEACH, FL 32968 US		Mailing Address 4465 12TH MANOR S.W. VERO BEACH, FL 32968 US	
2. Principal Place of Business - No P.O. Box # <i>2577 Langrove Ln SW</i>		3. Mailing Address <i>2577 Langrove Ln SW</i>	
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 	
City & State <i>Vero Beach, FL</i>		City & State <i>Vero Beach, FL</i>	
Zip <i>32962</i>	Country <i>USA</i>	Zip <i>32962</i>	Country <i>USA</i>
4. FEI Number <i>61-1463152</i>		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75 Additional Fee Required</b>	
<b>6. Name and Address of Current Registered Agent</b> DELORETO, JOSEPH A 4465 12TH MANOR S.W. VERO BEACH, FL 32968		<b>7. Name and Address of New Registered Agent</b> Name <i>Deloreto, Joseph A</i> Street Address (P.O. Box Number is Not Acceptable) <i>2577 Langrove Ln SW</i> City <i>Vero Beach</i> <b>FL</b> Zip Code <i>32962</i>	
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 <i>[Signature]</i> DATE <i>7/24/08</i> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
<b>FILE NOW!! FEE IS \$150.00</b> <b>Due by September 12, 2008</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
<b>10. OFFICERS AND DIRECTORS</b>		<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V.P. DELORETO, JOSEPH A 4465 12TH MANOR S.W. VERO BEACH, FL 32968	TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP Deloreto, Joseph A 2577 Langrove Ln SW Vero Beach, FL 32962
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V.P. RICHMOND, TODD L 2148 BRIGHTON LN. ORLANDO, FL 32817	TITLE NAME STREET ADDRESS CITY - ST - ZIP	Change <input type="checkbox"/> Addition <input type="checkbox"/>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Delete <input type="checkbox"/>	TITLE NAME STREET ADDRESS CITY - ST - ZIP	Change <input type="checkbox"/> Addition <input type="checkbox"/>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Delete <input type="checkbox"/>	TITLE NAME STREET ADDRESS CITY - ST - ZIP	Change <input type="checkbox"/> Addition <input type="checkbox"/>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Delete <input type="checkbox"/>	TITLE NAME STREET ADDRESS CITY - ST - ZIP	Change <input type="checkbox"/> Addition <input type="checkbox"/>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Delete <input type="checkbox"/>	TITLE NAME STREET ADDRESS CITY - ST - ZIP	Change <input type="checkbox"/> Addition <input type="checkbox"/>
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: <i>[Signature]</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Date <i>7/24/08</i> Daytime Phone #	