2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000101111

Entity Name: MAHONEY'S FLOORING INSTALLATIONS, INC.

FILED Mar 28, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

110 COLONY WAY E 648 SW JADA ROAD JUPITER, FL 33458 PORT ST LUCIE, FL 34953

Current Mailing Address: New Mailing Address:

110 COLONY WAY E P.O. BOX 881752

JUPITER, FL 33458 PORT ST LUCIE, FL 34988

FEI Number: 65-0880141 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

MAHONEY, JOHN MAHONEY, PATRICK 110 COLONY WAY E 648 SW JADA ROAD

US PORT ST LUCIE, FL 34953 JUPITER, FL 33458 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: PATRICK MAHONEY 03/28/2006

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete Title: **PRFS** (X) Change () Addition

Title: MAHONEY, JOHN MAHONEY, PATRICK Name: Name: 110 COLONY WAY E 648 SW JADA ROAD Address: Address:

PORT ST LUCIE, FL 34953 US City-St-Zip: JUPITER, FL 33458 City-St-Zip:

Title: VΡ Title: VΡ (X) Change () Addition () Delete

Name: MAHONEY, PATRICK Name: MAHONEY, DANA 110 COLONY WAY E 648 SW JADA ROAD Address: Address: JUPITER, FL 33458 PORT ST LUCIE, FL 34953 US City-St-Zip: City-St-Zip:

Title: Title: () Change (X) Addition () Delete SECR

MAHONEY, DANA Name: Name: 648 SW JADA ROAD Address Address: City-St-Zip: City-St-Zip: PORT ST LUCIE, FL 34953 US

Title: () Delete Title: () Change (X) Addition

MAHONEY, PATRICK Name: Name: Address: Address: 648 SW JADA ROAD City-St-Zip: City-St-Zip: PORT ST LUCIE, FL 34953

I hereby certify that the information supplied with this filing does not qualify for the 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: PATRICK MAHONEY **PRES** 03/28/2006