## 2006 FOR PROFIT CORPORATION

## FILED ANNUAL REPORT Apr 28, 2006 08:00 AN Secretary of State DOCUMENT # V70280 DYNASTY CARPET WAREHOUSE INC. Principal Place of Business Mailing Address 701 NE 23RD ST. 701 NE 23RD ST. STE 201 STE 201 MIAMI, FL 33137 MIAMI, FL 33137 03252006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0363793 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent AYAD, JORGE DO NOT WRITE 701 NE 23RD ST. APT. 201 IN THIS SPACE MIAMI, FL 33137 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE AYAD, JORGE NAME STREET ADDRESS 701 NE 23RD ST., APT. 201 MIAMI, FL 33137 City-SI-ZIP TITLE NAME STREET ADDRESS U00000540658 05/10/06-80026-007 150.00 CITY - ST - ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CHY-ST-ZIP HILE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CHTY-ST-ZIP

12. I hereby certify that the information supplied with this filling 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.

TITLE NAME STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #