I hereby 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 all other like empowered.

SIGNATURE: STEVE CZYZNIK

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# S18352 Entity Name: S & J WALLCOVERING, INC.

Current Principal Place of Business:

4144 ANACONDA DR NEW PORT RICHEY, FL 34655

Current Mailing Address:

4144 ANACONDA DR NEW PORT RICHEY, FL 34655

FEI Number: 59-3031006

Name and Address of Current Registered Agent:

CZYZNIK, STEVEN 4144 ANACONDA DR NEW PORT RICHEY, FL 34655 US

The above named entity submits this staten

SIGNATURE:

Electronic Signatur

Officer/Director Detail :

Title	PST	Title	VP
Name	CZYZNIK, STEVE	Name	CZYZNIK, TRACI
Address	4144 ANACONDA DR	Address	4144 ANACONDA DR
City-State-Zip:	NEW PORT RICHEY FL 34655	City-State-Zip:	NEW PORT RICHEY FL

PRESIDENT

04/26/2014

FILED Apr 26, 2014 Secretary of State CC6605303913

Certificate of Status Desired: Yes

Date

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT