

# 2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000009844

**FILED**  
**Nov 27, 2006**  
**Secretary of State**

**Entity Name:** QUALITY STONE BY MARTILE INC.

**Current Principal Place of Business:**

16900 N BAY ROAD  
1807  
SUNNY ISLES BEACH, FL 33160

**New Principal Place of Business:**

444 BRICKELL AVE  
730  
MIAMI, FL 33131

**Current Mailing Address:**

16900 N BAY ROAD  
1807  
SUNNY ISLES BEACH, FL 33160

**New Mailing Address:**

444 BRICKELL AVE  
730  
MIAMI, FL 33131

**FEI Number:** 04-3737193

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MALAYER, EFRAIN  
16900 N BAY RD  
1807  
SUNNY ISLES BEACH, FL 33160 US

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

MALAYER, EFRAIN  
13975 SW 145 PL  
MIAMI, FL 33186 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: EFRAIN MALAYER

11/27/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P/D ( ) Delete  
Name: MALAYER, EFRAIN  
Address: 16900 N BAY RD SUITE 1807  
City-St-Zip: SUNNY ISLES, FL 33160

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P/D (X) Change ( ) Addition  
Name: MALAYER, EFRAIN  
Address: 444 BRICKELL AVE SUITE 730  
City-St-Zip: MIAMI, FL 33131

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: EFRAIN MALAYER

P/D

11/27/2006

Electronic Signature of Signing Officer or Director

Date