

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 22, 2004 8:00 am
Secretary of State

05-27-2004 90015 028 ***150.00

DOCUMENT # P03000079892	
1. Entity Name R.R.C. TILE, INC.	

Principal Place of Business 13800 SW 8TH ST. SUITE 341 MIAMI, FL 33184	Mailing Address 13800 SW 8TH ST. SUITE 341 MIAMI, FL 33184
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2. Principal Place of Business Suite, Apt., etc.	3. Mailing Address Suite, Apt., etc.
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City & State	City & State
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Zip	Country	Zip	Country
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66430368



05122004 - Chg-P - CR2E034 (10/03)

4. FEI Number 04-3767593	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent GARCIA, CARLOS 13800 SW 8TH ST. SUITE 341 MIAMI, FL 33184	
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7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	FL Zip Code

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	(NOTE: Registered Agent signature required when reinstating)	DATE
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FILE NOW!!! FEE IS \$550.00 Due by September 8, 2004	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
CARLOS GARCIA 13800 SW 8TH ST #341 MIAMI, FL 33184	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
RAFAEL MORENO 1950 SW 24TH MIAMI, FL 33145	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: 	Date: 7/14/04	Daytime Phone #: (954) 491-5179
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