

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000048290

FILED
Jan 29, 2009
Secretary of State

Entity Name: MC FAMILY TILE CORPORATION

Current Principal Place of Business:

12030 SW 171 TERRACE
MIAMI, FL 33177

New Principal Place of Business:

9046 SW 203TERRACE
CUTLER BAY, FL 33189

Current Mailing Address:

12030 SW 171 TERRACE
MIAMI, FL 33177

New Mailing Address:

9046 SW 203TERRACE
CUTLER BAY, FL 33189

FEI Number: 20-0891760

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MIJARES, ORESTE
12030 SW 171 TERRACE
MIAMI, FL 33177 US

Name and Address of New Registered Agent:

MIJARES, ORESTES
9046 SW 203 TERRACE
CUTLER BAY, FL 33189 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: ORESTES MIJARES

01/29/2009

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 () Delete
Name: MIJARES, ORESTE
Address: 12030 SW 171 TERRACE
City-St-Zip: MIAMI, FL 33177

Title: VP () Delete
Name: CASTELLANOS, ABIEL
Address: 12030 SW 171 TERRACE
City-St-Zip: MIAMI, FL 33177

Title: S () Delete
Name: MIJARES, ORESTE
Address: 12030 SW 171 TERRACE
City-St-Zip: MIAMI, FL 33177

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MIJARES, ORESTES
Address: 9046 SW 203 TERRACE
City-St-Zip: CUTLER BAY, FL 33189

Title: VP (X) Change () Addition
Name: CASTELLANOS, ABIEL
Address: 9046 SW 203TERRACE
City-St-Zip: MIAMI, FL 33189

Title: S (X) Change () Addition
Name: MIJARES, ORESTES
Address: 9046 SW 203 TERRACE
City-St-Zip: CUTLER BAY, FL 33189

I hereby certify that the information supplied with this filing does not qualify 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: ORESTES MIJARES

P

01/29/2009

Electronic Signature of Signing Officer or Director

Date