

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000107129

FILED  
Mar 09, 2006  
Secretary of State

Entity Name: CABALLERO'S BIG TILE CORP.

**Current Principal Place of Business:**

4752 WALDEN CIR. #712  
ORLANDO, FL 32811

**New Principal Place of Business:**

**Current Mailing Address:**

4752 WALDEN CIR. #712  
ORLANDO, FL 32811

**New Mailing Address:**

FEI Number: 20-3259283      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

CABALLERO, EMRIQUE  
4760 WALDEN CIR. #523  
ORLANDO, FL 32811      US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: CABALLERO, ENRIQUE  
Address: 4760 WALDEN CIR. #523  
City-St-Zip: ORLANDO, FL 32811

Title: V ( ) Delete  
Name: CABALLERO, DANIEL  
Address: 4760 WALDEN CIR. #523  
City-St-Zip: ORLANDO, FL 32811

Title: D ( ) Delete  
Name: MAURICIO, GERSSON  
Address: 4760 WALDEN CIR. #523  
City-St-Zip: ORLANDO, FL 32811

Title: D ( ) Delete  
Name: MAURICIO, RUBEN  
Address: 4760 WALDEN CIR. #523  
City-St-Zip: ORLANDO, FL 32811

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: CABALLERO, AGUSTIN  
Address: 4760 WALDEN CIR. #523  
City-St-Zip: ORLANDO, FL 32811

Title: D (X) Change ( ) Addition  
Name: CABALLERO, GERARDO  
Address: 4760 WALDEN CIR. #523  
City-St-Zip: ORLANDO, FL 32811

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: ENRIQUE CABALLERO

P

03/09/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date