

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000027710

**FILED**  
**May 06, 2014**  
**Secretary of State**  
**CC5474019037**

**Entity Name:** TILE DOCTOR OF CENTRAL FLORIDA, INC.

**Current Principal Place of Business:**

3806 RUNNING DEER DRIVE  
ORLANDO, FL 32829

**Current Mailing Address:**

3806 RUNNING DEER DRIVE  
ORLANDO, FL 32829 US

**FEI Number: 73-1630917**

**Certificate of Status Desired: No**

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

GOMEZ, LUIS F  
3806 RUNNING DEER DRIVE  
ORLANDO, FL 32829 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name GOMEZ, LUIS F  
Address 3806 RUNNING DEER DRIVE  
City-State-Zip: ORLANDO FL 32829

Title ST  
Name ALICEA, MYRIAM  
Address 3806 RUNNING DEER DRIVE  
City-State-Zip: ORLANDO FL 32829

*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: MYRIAM ALICEA**

**SECRETARY /  
TREASURER**

**05/06/2014**

Electronic Signature of Signing Officer/Director Detail

Date