## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 640131**

Entity Name: IBERIA TILES CORPORATION

FILED Apr 14, 2005 Secretary of State

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Current P	rincipal Place of Business:	New Principal Place of Business:
2975 NW MIAMI, FL	77 AVE 331221409	
Current M	lailing Address:	New Mailing Address:
2975 NW MIAMI, FL	77 AVE 331221409	
FEI Number	: 59-1925820 FEI Number Applied For	( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )
Name and	d Address of Current Registered Age	ent: Name and Address of New Registered Agent:
2975 NW MIAMI, FL	33122 US	New Mailing Address:  (1) FEI Number Not Applicable (1) Certificate of Status Desired (1) Int: Name and Address of New Registered Agent:  In the purpose of changing its registered office or registered agent, or both,  and Agent Date  Date  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:  Title: (1) Change (1) Addition Name: Address: City-St-Zip: Title: (1) Change (1) Addition Name: Address:
	e named entity submits this statement for e of Florida.	or the purpose of changing its registered office or registered agent, or bot
SIGNATU	RE:	
	Electronic Signature of Register	red Agent Date
Election Ca	mpaign Financing Trust Fund Contribution (	).
OFFICER	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTO
Title: Name: Address: City-St-Zip:	CD ( ) Delete SUGRANES, ROSA, 2975 NW 77 AVE MIAMI, FL	Name: Address:
Title: Name: Address: City-St-Zip:	PSDT () Delete RODRIGUEZ-VILA, FERN, ANDO 2975 NW 77 AVE MIAMI, FL	Name: Address:
Title: Name: Address: City-St-Zip:	D ( ) Delete CUOGHI, CLAUDIO 2975 NW 77 AVE MIAMIF, L	Name: Address:
Title: Name: Address: City-St-Zip:	D ( ) Delete SUGRANES, MARCELINO 2975 NW 77 AVE MIAMI, FL 331221409	Name: Address:
Title: Name: Address: City-St-Zip:	D ( ) Delete RONCAGLIA, DAVIDE 2975 NW 77 AVE MIAMI, FL 33122	Name:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ROSA SUGRANES CD 04/14/2005