


**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 30, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # 664343</b> 1. Entity Name NATIONAL CERAMICS OF FLORIDA, CORP.	
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Principal Place of Business 7800 NW 34TH STREET SUITE 100 DORAL, FL 33122	Mailing Address 7800 NW 34TH STREET SUITE 100 DORAL, FL 33122
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02222007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-1968477	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  RIVERA, JOSUE 7800 N W 34THST STE 100 MIAMI, FL
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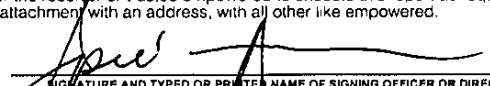
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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent	
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>	DATE _____

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees	U000000741423 05/15/07-80029-002 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD RIVERA, JOSUE 7800 NW 34TH STREET 100 DORAL, FL 33122
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T RIVERA, LOUISE 7800 NW 34TH STREET 100 DORAL, FL 33122
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVPD RIVERA, JENNIFER 7800 NW 34TH ST. #100 DORAL, FL 33122
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: 04/16/07 305 Daytime Phone: 591-8326