2001 UNIFORM BUSINESS REPORT (UBR)

Mar 08, 2001 8:00 am **DOCUMENT #855984 Secretary of State** 1. Entity Name AMERICAN MARAZZI TILE, INC. 03-08-2001 90190 034 ***150.00 Principal Place of Business Mailing Address 359 CLAY ROAD 359 CLAY ROAD SUNNYVALE TX 75182 SUNNYVALE TX 75182 C0032097 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 75-1699522 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 City Zip Code 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. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. CR2E034 (10/00) D PICKERI, GIUSEPPI 359 CLACI RD. SUNDAVALLE TX 15/82 TITLE Delete TITLE MARAZZI, FILIPPO NAME NAME VIALE REGINA PACIS, 1 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 41049 SASSUOLO, ITALY CITY-ST-ZIP TITLE Delete TITLE SEVERI, GIAN PIETRO NAME NAME VIALE REGINA PACIS, 1 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 41049 SASSUOLO ITALY CITY-ST-ZIP ☐ Addition TITLE Change Delete TITLE COTTICA, CARLO NAME NAME STREET ADDRESS 359 CLAY RD. STREET ADDRESS CITY-ST-ZIP SUNNYVALE TX CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition CARLILE, DAVID NAME NAME 359 CLAY ROAD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SUNNYVALE TX 75182 TITLE □ Delete TITLE ☐ Change ☐ Addition vánďini, mauro NAME STREET ADDRESS 359 CLAY RD STREET ADDRESS CITY-ST-ZIP SUNNYVALE TX 75182 CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered. SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: