2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 13, 2007
Secretary of State

DOCUMENT# F06000005741

Entity Name: CANCOS TILE CORPORATION

Current Principal Place of Business:

2301 NORTHWEST 84TH AVE
DORAL, FL 33122

New Principal Place of Business:

Current Mailing Address:

1085 PORTION ROAD
FARMINGVILLE, NY 11738

New Mailing Address:

FEI Number: 11-1715208 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

AGENTS AND CORPORATIONS, INC.
773 4TH AVE NORTH STE E
NAPLES, FL 34102 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:	VALVA, ROBERT F	
Address:	283 GREAT RIVER RD	
City-St-Zip:	GREAT RIVER, NY 11739	
Title:	V	( ) Delete
Name:	VALVA, MARK	
Address:	20 CRESTVIEW DR	
City-St-Zip:	BAYPORT, NY 11705	
Title:	V	( ) Delete
Name:	MCAULIFFE, SUSAN	
Address:	21 DANA LANE DR	
City-St-Zip:	EAST ISLIP, NY 11730	
Title:	V	( ) Delete
Name:	WHITE, BERNADETTE	
Address:	57 S SNEDECOR AVE	
City-St-Zip:	BAYPORT, NY 11705	
Title:	S	( ) Delete
Name:	PURCHLA, JOANNE V	
Address:	240 W SHORE RD	
City-St-Zip:	OAKDALE, NY 11769	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	V	(X) Change ( ) Addition
Name:	VALVA, MARK	
Address:	20 CRESTVIEW CT	
City-St-Zip:	BAYPORT, NY 11705	
Title:	V	(X) Change ( ) Addition
Name:	MCAULIFFE, SUSAN	
Address:	21 DANA LANE	
City-St-Zip:	EAST ISLIP, NY 11730	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		

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: JOANNE VALVA PURCHLA S 03/13/2007

Electronic Signature of Signing Officer or Director — Date