

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K53190

FILED
Jun 30, 2004
Secretary of State

Entity Name: E. & C. INTERNATIONAL TILES, INC.

Current Principal Place of Business:

% ARMANDO PARRA
2620 SW 137 AVE
MIAMI, FL 33175 US

New Principal Place of Business:

Current Mailing Address:

3037 N.W. 79 AVE
MIAMI, FL 33122 US

New Mailing Address:

FEI Number: 65-0086096

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PARRA, CARLOS L
14307 S.W. 19 TERRACE
MIAMI, FL 33175

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: PARRA, CARLOS L
Address: 14307 S.W. 19 TERRACE
City-St-Zip: MIAMI, FL 33175

Title: T () Delete
Name: PARRA, CARLOS L
Address: 14307 S.W. 19 TERRACE
City-St-Zip: MIAMI, FL 33175

Title: VDSD () Delete
Name: PARRA, MARGARITA
Address: 14307 S.W. 19 TERRACE
City-St-Zip: MIAMI, FL 33175

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 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: CARLOS L. PARRA

PD

06/30/2004

Electronic Signature of Signing Officer or Director

Date