2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000039384

Entity Name: EMPIRE TILE OF NAPLES, INC.

FILED Mar 31, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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1243 MADISON COURT 811 JEFFERSON AVENUE IMMOKALEE, FL 34142 IMMOKALEE, FL 34142

Current Mailing Address: New Mailing Address:

4001 SANTA BARBARA BLVD., PMB 125 811 JEFFERSON AVENUE NAPLES, FL 34104 IMMOKALEE, FL 34142

FEI Number: 59-3725541 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

VILLA, ADOLFO

1243 MADISON COURT

IMMOKALEE, FL 34142 US

VILLA, ADOLFO

811 JEFFERSON AVENUE

IMMOKALEE, FL 34142 US

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: ADOLFO VILLA 03/31/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: () Change () Addition

 Name:
 CRETELLA, PAUL
 Name:

 Address:
 4001 SANTA BARBARA BLVD., PMB 125
 Address:

 City-St-Zip:
 NAPLES, FL 34104
 City-St-Zip:

Name: VILLA, ADOLFO Name: VILLA, ADOLFO

Address: 1243 MADISON COURT Address: 811 JEFFERSON AVENUE City-St-Zip: IMMOKALEE, FL 34142 City-St-Zip: IMMOKALEE, FL 34142

Title: D () Delete Title: D (X) Change () Addition

Name: VILLA, JOSE Name: VILLA, JOSE

Address: 1243 MADISON COURT Address: 811 JEFFERSON AVENUE
City-St-Zip: IMMOKALEE, FL 34142 City-St-Zip: IMMOKALEE, FL 34142

I hereby certify that the information supplied with this filing does not qualify 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: ADOLFO VILLA PRES 03/31/2009