


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 23, 2006 08:00 AM
Secretary of State

DOCUMENT # P01000039709
 1. Entity Name
 OLYMPUS MARBLE & TILE, INC.



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| Principal Place of Business 10233 NW 9TH ST CIRCLE #201 MIAMI, FL 33172 | Mailing Address 10233 NW 9TH ST CIRCLE #201 MIAMI, FL 33172 |
|--|--|

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01192006 No Chg-P CR2E034 (11/05)

| | |
|--|-------------------------------|
| 4. FEI Number 65-1101512 | 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
 VERDAZCO, ELDIS M
 10233 NW 9TH ST CIRCLE
 #201
 MIAMI, FL 33172

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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:  DATE: 1/19/06
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00

10. OFFICERS AND DIRECTORS

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|--|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PTD DE LA ROSA, JOSE E 10595 NW 7TH TERR MIAMI, FL 33172 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | SVD VERDAZCO, ELDIS M 10233 NW 9 ST CIRC. #201 MIAMI, FL 33172 |
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 01/30/06-80063-013 150.00

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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: 1/19/06 DAYTIME PHONE: (305) 4017475
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR