

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000055785

FILED  
Mar 11, 2009  
Secretary of State

Entity Name: BLUE TILE SPECIALTY CORP.

## Current Principal Place of Business:

370 SW 14TH AVENUE  
FORT LAUDERDALE, FL 33312

## New Principal Place of Business:

784 TIVOLI CIRCLE APT 203  
DEERFIELD BEACH, FL 33441

## Current Mailing Address:

370 SW 14TH AVENUE  
FORT LAUDERDALE, FL 33312

## New Mailing Address:

784 TIVOLI CIRCLE APT 203  
DEERFIELD BEACH, FL 33441

FEI Number: 65-1109596

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

TAX HOUSE CORPORATION  
1100 S FEDERAL HWY  
DEERFIELD BEACH, FL 33442 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: PD ( ) Delete  
Name: NASCIMENTO, VALDENIR A  
Address: 370 SW 14TH AVENUE  
City-St-Zip: FORT LAUDERDALE, FL 33312 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: NASCIMENTO, VALDENIR A  
Address: 784 TIVOLI CIRCLE APT 203  
City-St-Zip: DEERFIELD BEACH, FL 33441 US

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: VALDENIR NASCIMENTO

P

03/11/2009

Electronic Signature of Signing Officer or Director

Date