2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P01000071826

Entity Name: TOTAL TILE OF ISLAMORADA, INC.

FILED Oct 27, 2004 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
88055 OVERSEAS HIGHWAY PLANTATION KEY ISLAMORADA, FL 33036				91421 OVERSEAS HIGHWAY SUITE #104 TAVERNIER, FL 33070			
Current Mailing Address:				New Mailing Address:			
88055 OVERSEAS HIGHWAY PLANTATION KEY ISLAMORADA, FL 33036				91421 OVERSEAS HIGHWAY SUITE #104 TAVERNIER, FL 33070			
FEI Number:	: 65-1123197	FEI Number Applied For ()	FEI Num	ber Not App	licable ()	Certificate of Status Desired ()	
Name and	Address of (Current Registered Agent:		Name and	Address of N	New Registered Agent:	
1840 SOU 4TH FLOC	& UTRERA, P. THWEST 22 S DR 33145 US						
	e named entity e of Florida.	submits this statement for the p	ourpose of	changing i	ts registered o	office or registered agent, or both	
SIGNATUR	RE:						
Electronic Signature of Registered Agent				Date			
		3(2)(b), F.S., the corporation did no	ot receive th	ne prior notic	e.		
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR			
Title: Name: Address: City-St-Zip:	VALDES, MICH	EAS HIGHWAY, PLANTATION KEY		Title: Name: Address: City-St-Zip:	P (X VALDES, MICH 91421 OVERSI TAVERNIER, F	EAS HIGHWAY	
Title: Name: Address: City-St-Zip:	ASENCIO, NA	EAS HIGHWAY, PLANTATION KEY		Title: Name: Address: City-St-Zip:	V (X ALVAREZ, NOF 91421 OVERSI TAVERNIER, F	EAS HIGHWAY	
Title: Name: Address: City-St-Zip:	ALVAREZ, NÒI	EAS HIGHWAY, PLANTATION KEY		Title: Name: Address: City-St-Zip:) Change () Addition	
Title: Name: Address: City-St-Zip:	VALDES, MICH	EAS HIGHWAY		Title: Name: Address: City-St-Zip:	()) Change()Addition	

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: MICHEL VALDES PRES 10/27/2004