

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P02000046928

FILED
Oct 29, 2008
Secretary of State**Entity Name:** PORTILLO ROQUE TILE CORP.**Current Principal Place of Business:**851 SW 4 STREET
9
MIAMI, FL 33130**New Principal Place of Business:****Current Mailing Address:**851 SW 4 STREET
9
MIAMI, FL 33130**New Mailing Address:****FEI Number:** 02-0591284**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**PORTILLO, JUAN CARLOS
851 SW 4 STREET
9
MIAMI, FL 33130 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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PORTILLO, JUAN CARLOS
Address: 851 SW 4 STREET #9
City-St-Zip: MIAMI, FL 33130

Title: V (X) Delete
Name: ROQUE, ORLANDO
Address: 851 SW 4 STREET #9
City-St-Zip: MIAMI, FL 33130

Title: T () Delete
Name: PORTILLO, SALVADOR
Address: 851 SW 4 STREET #9
City-St-Zip: MIAMI, FL 33130

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 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: JUAN CARLOS PORTILLO

P

10/29/2008

Electronic Signature of Signing Officer or Director

Date