FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

attachment with an address, with all other like empowered.

SIGNATURE: (

FILED DOCUMENT # 02 0000 46428 03 OCT -7 AM 9: 10 Portillo Roque Tile Corp. SECRETARY OF STATE TATLAHASSEE, FLORIDA DO NOT WRITE IN THIS SPACE 600023620486 10/07/03--01057--009 **150.00 Suite, Apt. #, etc. Applied For Not Applicable **\$8.75** Additional 5. Certificate of Status Desired Name and Address of Current Registered DO NOT WRITE Street Address (P.O. Box Number is Not Acceptable) IN THIS SPACE 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^{*} January 1 - May 1 Fee is \$150.00 **\$5.00** May Be 9. Election Campaign Financing After May 1, Fee is \$550.00 Amended UBR is \$61.25 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS CR2E034B (12/02) TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TILL ب و فاد ب عدو ف از عددی همید ب مسیم بهرست می NAME NAME STREET ADDRESS STREET ADDRESS DO NOT WRITE CITY-ST-ZIP CITY-ST-ZIP TITLE IN THIS SPACE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE NAME NAME STREET, ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify 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 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 on an attempt of the condition with all other like and the product of the condition with all other like and the product of the condition of the condition with all other like and the product of the condition of the product of the condition of the product of the condition of the product of the p

ED MANE OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

AFFIDAVIT WITH JURAT

Date: October 3, 2003

RE: DOCUMENT # P02000046928

State of Florida County of Miami-Dade

The purpose of this letter is to acknowledge that I, Juan Carlos Portillo, President of PORTILLO ROQUE TILE CORP. located at 851 SW 4 Street #9 in Miami, Florida 33130, and properly identified with Florida Driver's License declare under oath declare that:

I mailed the Uniform Business Report with a check for \$150 which never cleared my bank. For this reason I ask that you accept a duplicate check in the amount of \$150. If there are any inquiries please contact my Accountant JANET VASALLO at your convenience (305) 643-2482.

Affiant's Signatufe

NOTARY PUBLIC

JANET VASALLO

Notary Public - State of Florida

MyCommission Expires Jun 25, 2007

Commission # DD208381

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