2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE ≈

May 02, 2005 08:00 AM Secretary of State DOCUMENT # P02000057248 GUERRERO TILE & MARBLE, CORP. Principal Place of Business Mailing Address 1802 N. UNIVERSITY DR. 1802 N. UNIVERSITY DR., #114 PLANTATION, FL 33322 PLANTATION, FL 33322 03192005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 75-3060141 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent GUERRERO, MARCO F DO NOT WRITE 1802 N. UNIVERSITY DR., #114 PLANTATION, FL 33322 IN THIS SPACE his 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 8. The above named entity submi the obligations of registered SIGNATURE. Signalure, (voto et print (NOTE Registered Agent signature required when reinstaling) ent and little if applicable. \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2005 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. TITLE GUERRERO, MARCO F NAME STREET ADDRESS 1802 N. UNIVERSITY DR., #114 PLANTATION, FL 33322 CITY-ST-ZIP 05/03/05-80030-002 150.00 TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY - ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP IITLE NAME STREET ADDRESS CITY - ST-ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP 12. Thereby 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 of 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.

ED NAME OF SIGNING OFFICER OR DIRECTOR

FILED

Daytime Phone #