2008 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

May 01, 2008 8:00 am Secretary of State **DOCUMENT # P02000072816** 05-01-2008 90245 050 ***150.00 TILE FLOORS & MORE, INC. Principal Place of Business Mailing Address 111 LAKEN LANE 111 LAKEN LANE ORLANDO, FL 32804 ORLANDO, FL 32804 2. Principal Place of Business - No P.O. Box # 3. Mailing Address 522 S. HUNT CLUB BUD 522 S. HUNT CLUBBUD Suite, Apt. #, etc. 04292008 CR2E034 (12/06) #404 #404 City & State Applied For City & State 4. FEI Number APOPKA, FL APOPKA, FL 46-0490677 Not Applicable \$8.75 Additional Country 5. Certificate of Status Desired US Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Allen K. Green -GREER, ALLEN K Street Address (P.O. Box Number is Not Acceptable) 523 5 HUNT CLUB BLV D 111 LAKEN LANE ORLANDO, FL 32804 APOPKA 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 (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE TITLE Change ☐ Addition ☐ Delete Allen K. Greer NAME GREER, ALLEN K NAME 522 5 HUNT CLUB BLVD + 404 111 LAKEN LANE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ORLANDO, FL 32804 CITY-ST-7IP APOPKA1FL 32703 ☐ Change TITLE TITLE ☐ Addition SMITH, KELLY J NAME NAME 7995 96TH COURT STREET ADDRESS STREET ADDRESS CITY-ST-ZIP VERO BEACH, FL 32967 CITY-ST-ZIP TITLE TITLE Change Addition Delete RAWLS, HEATH H NAME NAME STREET ADDRESS 1292 PRINCE COURT STREET ADDRESS CITY-ST-ZIP LAKEMARY, FL 32746 CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY-ST-ZIP Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

PRES IDENT

FILED