2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000006096

Entity Name: EAGLE EYES TILE, CORP.

FILED Apr 28, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3121 S SEMORN BLVD 2019 WINTERMERE POINTE DR WINTER GARDEN, FL 34787 287

ORLANDO, FL 32822

3121 S SEMORN BLVD 2019 WINTERMERE POINTE DR WINTER GARDEN, FL 34787

ORLANDO, FL 32822

Current Mailing Address:

FEI Number: 03-0501351 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

New Mailing Address:

DOS REIS, EDERSON B

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

DOS REIS, EDERSON B 3121 S. SEMORAN BLVD, SUITE 287

2019 WINTERMERE POINTE DR ORLANDO, FL 32822 WINTER GARDEN, FL 34787

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: 04/28/2006

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition DOS REIS, EDERSON B DOS REIS, EDERSON B Name: Name:

3121 S. SEMORAN BLVD, SUITE 287 2019 WINTERMERE POINTE DR Address: Address: City-St-Zip: ORLANDO, FL 32822 City-St-Zip: WINTER GARDEN, FL 34787 US

VΡ Title: (X) Change () Addition Title: () Delete

Name: DA SILVEIRA, WALDSON L Name: VIEIRA, GETULIO M

3121 S. SEMORAN BLVD, SUITE 287 2019 WINTERMERE POINTE DR Address: Address: ORLANDO, FL 32822 WINTER GARDEN, FL 34787 US City-St-Zip: City-St-Zip:

() Delete Title: Title: (X) Change () Addition

DE FREITAS, JOAO M DE FREITAS, JOAO M Name: Name:

3121 S. SEMORAN BLVD, SUITE 287 2019 WINTERMERE POINTE DR Address: Address: City-St-Zip: ORLANDO, FL 32822 City-St-Zip: WINTER GARDEN, FL 34787 US

I hereby certify that the information supplied with this filing does not qualify for the 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.

Ρ SIGNATURE: EDERSON B. DOS REIS 04/28/2006