2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000011007

Entity Name: GOLD TILE, INC.

FILED Apr 28, 2005 Secretary of State

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

677 TRACE CIRCLE 473 SE JUSTINE TERRACE

PORT SAINT LUCIE, FL 34983 US #204

DEERFIELD BEACH, FL 33441 US

New Mailing Address: Current Mailing Address:

473 SE JUSTINE TERRACE 677 TRACE CIRCLE #204

PORT SAINT LUCIE, FL 34983 US DEERFIELD BEACH, FL 33441 US

FEI Number: 27-0043664 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

GONCALVES, ALECIO R GONCALVES, ALECIO R 677 TRACE CIRCLE 473 SE JUSTÍNE TERRACE PORT SAINT LUCIE, FL 34983 US

#204 DEERFIELD BEACH, FL 33441 US

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: ALECIO R GONCALVES 04/28/2005

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 GONCALVES, ALECIO R GONCALVES, ALECIO R Name: Name: 677 TRACE CIRCLE#204 473 SE JUSTINE TERRACE Address: Address:

City-St-Zip: DEERFIELD BEACH, FL 33441 US City-St-Zip: PORT SAINT LUCIE, FL 34983 US

() Delete Title: VP D Title: VP,D (X) Change () Addition Name: SANTOS, MARCOS AURELIO Name: ANTUNES, CLERISTON 677 TRACE CIRCLE#204 677 TRACE CIRCLE#204 Address: Address: DEERFIELD BEACH, FL 33441 US DEERFIELD BEACH, FL 33441 US City-St-Zip: City-St-Zip:

Title: Title: S.D () Delete () Change () Addition

MENDES, SERGIO M Name: Name: 677 TRACE CIRCLE#204 Address: Address: City-St-Zip: DEERFIELD BEACH, FL 33441 US City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ALECIO R GONCALVES MR 04/28/2005