2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000034753

Entity Name: TILE AND STONE OF CENTRAL FLORIDA, INC.

FILED Mar 16, 2004 Secretary of State

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

418 W OAKRIDGE RD. 14603 GATEWAY POINT CR ORLANDO, FL 32809 BLDG 12 APT 12106

ORLANDO, FL 32821

Current Mailing Address: New Mailing Address:

418 W OAKRIDGE RD. P O BOX 692048 ORLANDO, FL 32809 P O BOX 692048 ORLANDO, FL 32869

FEI Number: 11-3682808 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

KOLAR, MIROSLAV

418 W OAKRIDGE RD

P O BOX 692048

ORIANDO FL 33260 LIS

ORLANDO, FL 32809 US ORLANDO, FL 32869 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: ROMAN SLAVIK 03/16/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Name:
 KOLAR, MIROSLAV
 Name:
 SLAVIK, ROMAN

 Address:
 418 W OAKRIDGE RD
 Address:
 P O BOX 692048

 City-St-Zip:
 ORLANDO, FL 32809
 City-St-Zip:
 ORLANDO, FL 32869

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: ROMAN SLAVIK P 03/16/2004