## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000057271

Entity Name: D.R.I. MARBLE FLOOR DESIGN, INC.

FILED Aug 31, 2007 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 1805 SANS SOUCI BLVD.
 13923 NE 20TH CT

 SUITE 403
 NORTH MIAMI, FL 33181

 NORTH MIAMI, FL 33181

Current Mailing Address: New Mailing Address:

 1805 SANS SOUCI BLVD.
 13923 NE 20TH CT

 SUITE 403
 NORTH MIAMI, FL 33181

 NORTH MIAMI, FL 33181

FEI Number: 43-2015451 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:

CLAUDIO, DRI
1805 SANS SOUCI BLVD
5UITE 403
13923 NE 20TH CT
NORTH MIAMI, FL 33181 US
13923 NE 20TH CT
NORTH MIAMI, FL 33181 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: CLAUDIO DRI 08/31/2007

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

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

 Name:
 DRI, CLAUDIO
 Name:
 DRI, CLAUDIO

 Address:
 1805 SANS SOUCI BLVD., # 403
 Address:
 13923 NE 20TH CT

 City-St-Zip:
 NORTH MIAMI, FL 33181
 City-St-Zip:
 NORTH MIAMI, FL 33181

Title: VD ( ) Delete Title: VD (X) Change ( ) Addition Name: DRI, JULIO DANIEL Name: DRI, JULIO DANIEL

Address: 1805 SANS SOUCI BLVD., # 403 Address: 13923 NE 20TH CT
City-St-Zip: NORTH MIAMI, FL 33181 City-St-Zip: NORTH MIAMI, FL 33181

 Name:
 DRI, LUIS A
 Name:
 DRI, LUIS A

 Address:
 1805 SANS SOUCI BLVD., # 403
 Address:
 13923 NE 20TH CT

 City-St-Zip:
 NORTH MIAMI, FL 33181
 City-St-Zip:
 NORTH MIAMI, FL 33181

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

SIGNATURE: CLAUDIO DRI PDT 08/31/2007