

**2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

**FILED  
Jun 16, 2005  
Secretary of State**

DOCUMENT# P03000063888

Entity Name: ROBERTO DIAZ TILE SETTER, INC

**Current Principal Place of Business:**

6543 STARDUST LANE  
LOT 224  
ORLANDO, FL 32818

**New Principal Place of Business:**

**Current Mailing Address:**

6543 STARDUST LANE  
LOT 224  
ORLANDO, FL 32818

**New Mailing Address:**

FEI Number: 06-1694263      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

ALMANZA, MIRNA  
642 S. DILLARD STREET  
WINTER GARDEN, FL 34787      US

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

DIAZ, ROBERTO  
6543 STARDUST LANE  
LOT 224  
ORLANDO, FL 32818 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: ROBERTO DIAZ      06/16/2005  
Electronic Signature of Registered Agent      Date

**OFFICERS AND DIRECTORS:**

Title: P/D ( ) Delete  
Name: DIAZ, ROBERTO  
Address: 6543 STARDUST LANE, LOT 224  
City-St-Zip: ORLANDO, FL 32818

Title: VP/D ( ) Delete  
Name: GUTIERREZ, VALENTIN  
Address: 6543 STARDUST LANE, LOT 224  
City-St-Zip: ORLANDO, FL 32818

Title: S/D (X) Delete  
Name: GUTIERREZ, CARLOS  
Address: 6543 STARDUST LANE, LOT 224  
City-St-Zip: ORLANDO, FL 32818

Title: D (X) Delete  
Name: SANCHEZ, MACARIO  
Address: 6543 STARDUST LANE, LOT 224  
City-St-Zip: ORLANDO, FL 32818

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP/D (X) Change ( ) Addition  
Name: ISLAS, AIDE  
Address: 6543 STARDUST LANE, LOT 224  
City-St-Zip: ORLANDO, FL 32818

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: ROBERTO DIAZ      P      06/16/2005  
Electronic Signature of Signing Officer or Director      Date