

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000070560

FILED  
Apr 28, 2006  
Secretary of State

Entity Name: THE CERAMIC GARDEN INC.

## Current Principal Place of Business:

4920 NEWKIRK DRIVE  
SUITE #1  
TAMPA, FL 33624

## New Principal Place of Business:

## Current Mailing Address:

4920 NEWKIRK DRIVE  
SUITE #1  
TAMPA, FL 33624

## New Mailing Address:

FEI Number: 32-0082621

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

TERRANOVA, CHRISTINE  
4201 HOLLOWTRAIL DR.  
TAMPA, FL 33624 US

## Name and Address of New Registered Agent:

TERRANOVA, CHRISTINE A PRES  
4201 HOLLOWTRAIL DR.  
TAMPA, FL 33624 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: CHRISTINE TERRANOVA

04/28/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: VD ( ) Delete  
Name: DI PIAZZA, CONCETTA V  
Address: 13923 CHANDRON DRIVE  
City-St-Zip: ODESSA, FL 33556

Title: PD ( ) Delete  
Name: TERRANOVA, CHRISTINE A  
Address: 4201 HOLLOWTRAIL DR.  
City-St-Zip: TAMPA, FL 33624

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change ( ) Addition  
Name: DI PIAZZA, CONCETTA V VP  
Address: 13923 CHANDRON DRIVE  
City-St-Zip: ODESSA, FL 33556

Title: PD (X) Change ( ) Addition  
Name: TERRANOVA, CHRISTINE A PD  
Address: 4201 HOLLOWTRAIL DR.  
City-St-Zip: TAMPA, FL 33624

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.

SIGNATURE: CONCETTA DI PIAZZA

VP

04/28/2006

Electronic Signature of Signing Officer or Director

Date