FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

4/2

FILED
May 13, 2004 8:00 am
Secretary of State
04-28-2004 90178 030 ***150.00

DOCUMENT #

1. Entity Name
Albertos Tile and Marble Designs Corp
Doc# P03000085601

DO NOT WRITE IN THIS SPACE

66421429

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2. Principal Place of Business	3. Mailing Address
5230 NW 196 lane	5230 NW196 lane
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Miami FL.	City & State: Miami FL.
Zip: 33055 / Country: U.S.A.	Zip: 33055 / Country: U.S.A.

4. FEI Number 51-0477214 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

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7. Name and Address of Current Registered Agent
Name: Jorge Alberto Rodriguez
Street Address (P.O. Box Number is Not Acceptable): 5230 NW 196 lane
City: Miami FL Zip Code: 33055

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE [signature] Signature, typed or printed name of registered agent and title if applicable. [signature] (NOTE: Registered Agent signature required when reinstating) 4/21/04 DATE

January 1 - May 1 Fee is $150.00
After May 1 Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	President
NAME	Jorge Alberto Rodriguez
STREET ADDRESS	5230 NW 196 lane
CITY-ST-ZIP	Miami FL. 33055
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
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TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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CR2E034B (12/02)

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: Jorge Alberto Rodriguez [signature] 4/21/04 (786)299-7706
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #