2007 FOR PROFIT CORPORATION ANNUAL REPORT

CITY-ST-7IP

SIGNATURE:

Apr 13, 2007 08:00 A Secretary of State **DOCUMENT # P03000085601** 1. Entity Name ALBERTO'S TILE & MARBLE DESIGNS CORP. Principal Place of Business Mailing Address 5230 NW 196TH LANE 5230 NW 196TH LANE MIAMI, FL 33055 US MIAMI, FL 33055 US 04072007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 51-0477214 Not Applicable \$8,75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent RODRIGUEZ, JORGE A DO NOT WRITE 5230 NW 196 LANE MIAMI, FL, FL 33055 IN THIS SPACE 8. The above named entity submits this steement 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 ed agent and title if applicable (NOTE: Registered Agent signature required when reinstating) \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2007 Fee will be \$550.00 10. OFFICERS AND DIRECTORS TITLE JORGE ALBERTO RODRIGUEZ NAME 5230 NW 196TH LANE STREET ADDRESS 000000703881 04/20/07-80158-014 150.00 CITY-ST-ZIP MIAMI, FL 33055 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-7IP TITLE STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 Block 11 if changed, or on an attachment with an address with all other like empowered.

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED