2008 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 02, 2008 08:00 AN Secretary of State DOCUMENT # P03000108191 HIGH QUALITY TILE INSTALLATION, INC Principal Place of Business Mailing Address 29 OLD KINGS ROAD N 22 PRETORIA LANE SUITE 4B PALM COAST, FL 32164 PALM COAST, FL 32137 01182008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FE! Number 73-1681213 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent FILIPE, NUNO M DO NOT WRITE 22 PRETORIA LANE PALM COAST, FL 32164 IN THIS SPACE 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. 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2008 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 000000877627 10. 04/14/08-80022-004 150.00 FILIPE, NUNO M NAME 22 PRETORIA LANE STREET ADDRESS CITY-ST-ZIP PALM COAST, FL 32164 TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITE F IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP

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.

SIGNATURE:

TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

FILED