

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 11, 2006 08:00 A
Secretary of State

DOCUMENT # P03000116275

1. Entity Name
LONDON TILE, INC.



Principal Place of Business
**7871 SAGEBRUSH PL
ORLANDO, FL 32822**

Mailing Address
**7871 SAGEBRUSH PL
ORLANDO, FL 32822**



03202006 No Chg-P CR2E034 (11/05)

4. FEI Number
77-0611199

Applied For
Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**GOMEZ, YONIER A
7333 KAHHA STREET
ORLANDO, FL 32822**

**DO NOT WRITE
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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	GOMEZ, YONIER A
STREET ADDRESS	7333 KAHHA STREET
CITY-ST-ZIP	ORLANDO, FL 32822
TITLE	VP
NAME	LONDONO, ELIZABETH
STREET ADDRESS	7333 KAHHA STREET
CITY-ST-ZIP	ORLANDO, FL 32822
TITLE	SECT
NAME	GOMEZ, YONIER A
STREET ADDRESS	7333 KAHHA STREET
CITY-ST-ZIP	ORLANDO, FL 32822
TITLE	TRES
NAME	LONDONO, ELIZABETH
STREET ADDRESS	7333 KAHHA STREET
CITY-ST-ZIP	ORLANDO, FL 32822
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000564362
05/20/06-80060-017 150.00

**DO NOT WRITE
IN THIS SPACE**

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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Yonier Gomez* **YONIER GOMEZ**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Pres 3-20-06 **Pres 3-20-06** *907-482-8389*
Date Daytime Phone #