2004 FOR PROFIT CORPORATION ANNUAL REPORT

May 17, 2004 8:00 am Secretary of State

05-17-2004 90015 022 ***150.00

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LUCY TILES & CERAMICS, INC. Mailing Address Principal Place of Business 24076129 24821 SOUTH DIXIE HIGHWAY 24821 SOUTH DIXIE HIGHWAY MIAMI, FL 33032 MIAMI, FL 33032 2. Principal Place of Business 3. Mailing Address Same 24821 S. DIXIE Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (10/03) 05042004 City & State City & State Applied For MLAMI Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 454 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name PINZON, LUCIA 24821 SOUTH DIXIE HIGHWAY Street Address (P.O. Box Number is Not Acceptable) MIAMI, FL 33032 City Zip Code 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 **XUUA** SIGNATURE (NOTE: Registered Agent signature required when reinstating) e of registered agent and title if applicable. 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Trust Fund Contribution. Added to Fees Due by September 8, 2004 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 Delete TITLE PINZON, LUCIA NAME NAME STREET ADDRESS 24821 SOUTH DIXIE HIGHWAY STREET ADDRESS MIAMI, FL 33032 CITY-S1-ZIP CITY-ST-ZIP ☐ Change ☐ Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CHY-\$1-ZIP CITY-ST-ZIP ☐ Change TITLE ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CiTY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAMÈ STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST- 7IP Delete TITLE Change ☐ Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

12. Thereby certify that the information supplied with this filling 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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

PINIZON

SIGNATURE:

w zen SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR