2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

	ANNUAL R	EPUKI (AK)		Fab 17 20	N6 N8.	nn A	M
DOCUMENT # P03000121337 1. Entity Name					Feb 17, 2006 08:00 AM Secretary of State			
MICHAEL	. HARRISON TILE, INC.		} {					
Principal Plac	e of Business	Mailing Address			1			
14109 LAURAL CREEK ROAD		14109 LAURAL CREEK ROAD						
ORLANDO	FL 32828	ORLANDO FL 32828						
2. Principal Place of Business		3. Mailing Address			1 100 (100 (10) BO (10) BO (10)	14 44 193 M 414 M494 M494	יצבר הוננו פיינורי	19 DE 11 18 DE
Suite. Apt. #, etc.		Suite, Apt. #, etc.		1st MOORE	CR2E034 (1)	0/05)		
City & State		City & State		4. FEI Number 20-034266			plied For t Applicat	
Zip	Country	Zıp	Country	(5. Certificate of Status Desired		.75 Addi Required	
	6. Name and Address of Current	Registered Agent			7. Name and Address of New	Registered Age	nt	
NACLE ADDI				Name				
141	GLE, APRIL 09 LAURAL CREEK ROAD			Street Address (P.O. Box Number is Not Acceptable)				
	ANDO FL 32828		<u> </u>			·		—
			}_	City				
			{	City			Zip Code	
8. The above the obligat	named entity submits this statement for ions of registered agent.	r the purpose of changing its	registered	office or register	red agent, or both, in the State of F	lorida. I am fami	liar with, a	and acce _l
_	5 5							
SIGNATURE	Signature, typed or printed name of registered agent of	and two if applicable (NCTE	· fregistered A	igent signature required	f when roinstainig)	DATE		
F	ILE NOW!!! FEE IS \$150.00	. 3 4	······································	- <u></u>				
After	May 1, 2006 Fee Will Be \$550,00 Payable to Florida Department of	Control of the Contro			9. Election Camp Trust Fund Co)O May 5 d to Fees
10.	OFFICERS AND		11.		ADDITIONS/CHANGES TO OF	EICEDO AND DII	TECTORS	
TITLE	P	☐ Delete	TITLE		ADDITIONO/GIANGES TO OF		Change	PANET Addiii
NAME	HARRISON, MICHAEL	being	NAME	}			Onango	
STREET ADORESS	14109 LAURAL CREEK ROAD		•	ADDRESS				
CITY-SI-ZIP	ORLANDO FL 32828	-	EITY-ST	T- ZIP				
TITLE NAME	SEC NAGLE, APRIL	□ Delete	TITLE NAME				Change	☐ Weiter
STREET ADDRESS	14109 LAURAL CREEK ROAD		4	ADDRESS				
CITY-ST-ZIP	ORLANDO FL 32828		CITY-ST	i				
TDEE		☐ Detate	UTLE				Change	☐ Addiji
NAME STREET ADDRESS		•	NAME		02/28/06-90	37642		
CITY-ST-ZIP			CITY-ST	AOURESS F-ZIP	02/28/06-90	1049-024 1	150.00	
TITLE		☐ Delete	SITLE				Change	Addition
NAME		22 5000	NAME				Drango	
STREET ADDRESS			1	ADDRESS				
City-St-zip		C.D.	CITY-ST	[- ZIP				
TITLE NAME		Delele	TITLE				Change	Addition
STREET ADURESS				ADDRESS				
CITY-ST-ZIP			Cary-St	,				
TITLE		☐ Delete	TITLE				Change	☐ Ange
NAME CIDELL ADDOCCO			NAME					
STREET ADDRESS CITY-ST-ZIP			STREET A	ADDRESS - 7'P				

12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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.

Missolini

FILED

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