2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000130881

Address:

City-St-Zip:

2031 CASCADES BLVD #201

KISSIMMEE, FL 34741 US

Entity Name: CHAVEZ TILE INSTALLERS. INC

FILED May 01, 2007 Secretary of State

Entity Name: CHAVEZ TILE INSTALLERS, INC.					
Current Principal Place of Business:			New Principal Place o	of Business:	
4121 WELLINGTON WOODS CIRCLE APT #101 KISSIMMEE, FL 347412756 US					
Current Mailing Address:			New Mailing Address	New Mailing Address:	
4121 WELLINGTON WOODS CIRCLE APT #101 KISSIMMEE, FL 347412756 US					
FEI Number:	20-0380550	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
MAYORGA, AUGUST C 200 NORTH DENNING DRIVE SUITE 5 WINTER PARK, FL 327893736 US			243 W KENNEDY BLVI SUITE C	MAYORGA, AUGUST C 243 W KENNEDY BLVD SUITE C ORLANDO, FL 32810 US	
The above in the State		ubmits this statement for the pu	ırpose of changing its registered	office or registered agent, or both,	
SIGNATURE:				05/01/2007	
Electronic Signature of Registered Agent			nt	Date	
		(2)(b), F.S., the corporation did not Trust Fund Contribution ().	receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	CHAVEZ-PARE	ON WOODS CIRCLE #101	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	VP () CHANG-SULEN, 4006 VENETIAN KISSIMMEE, FL	BAY DRIVE	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name:	VP () ALLAIN, OTTO V	Delete V	Title: Name:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: MARCO A CHAVEZ P 05/01/2007