2007 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

Apr 16, 2007 08:00 A Secretary of State DOCUMENT # P03000136473 1. Entity Name GUZMAN TILE & MARBLE CORP. Principal Place of Business Mailing Address 3946 TUSHEGEE DRIVE 3946 TUSHEGEE DRIVE LANTANA FL 33462 LANTANA FL 33462 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, otc Suite, Apt. #, etc. 1st MOORE CR2E034 (10/06) City & State City & State Applied For 4. FEI Number 20-0444464 Not Applicable Zip Country Zισ Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Namo GUZMAN, JESUS F Street Address (P.O. Box Number is Not Acceptable) 3946 TUSHEGEE DRIVE LANTANA FL 33462 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 registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable, (NOTE: Registered Agent a gnature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 HITLE Delete GUZMAN, JESUS R NAME NAME U00000706553 3946 TUSHEGEE DRIVE STREET ADDRESS STREET ADDRESS 04/24/07-80041-001 150.00 LANTANA FL 33462 CITY-SI-ZIP CITY-ST-ZIP VTD TITLE. Delete ☐ Change Addition GUZMAN, IVAN NAMI^{*} 3946 TUSHEGEE DRIVE STREET ADDRESS STREET ADDRESS LANTANA FL 33462 CUY-ST-ZIP CITY-ST-7IP SD TITLE ☐ Delete Change ■ Addition ORDONEZ, MERCEDES NAME 3946 TUSHEGEE DRIVE STREET ADDRESS STREET ADDRESS LANTANA FL 33462 CITY-ST-7IP CITY ST-ZIP TITLE Delete Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CHY-SI-ZIP CITY - ST - ZIP TITLE Delete Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY - ST- ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-SI-7IP CITY-SI-ZIP

SIGNATURE:

SENCE DES ORDONES 4/9/07 305-443-1458

CANING OFFICER OR DIRECTOR

Daytime Phone >

12. I hereby 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 eath; 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 ompowered.

FILED