2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000141190

Entity Name: SANTA ROSA TILE, INC.

FILED Apr 16, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

10116 CHARLESTON CORNER 7704 ROCK PALM AVE TAMPA, FL 33635

202

TAMPA, FL 33615

Current Mailing Address: New Mailing Address:

10116 CHARLESTON CORNER 7704 ROCK PALM AVE TAMPA, FL 33635

TAMPA, FL 33615 US

FEI Number: 20-0435783 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SANTA ROSA, PATRICK G SANTA ROSA, PETRE G 10116 CHARLESTON CORNER 7704 ROCK PALM AVE TAMPA, FL 33635 202 TAMPA, FL 33635 US

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.

SIGNATURE: PETRE G SANTA ROSA 04/16/2008

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: () Delete SANTA ROSA, PATRICK G Name: 10116 CHARLESTON CORNER Address:

City-St-Zip: TAMPA, FL 33635 US

Title: VΡ () Delete Name: SANTA ROSA, PETRE G 10116 CHARLESTON CORNER Address:

TAMPA, FL 33635 US City-St-Zip:

Title: (X) Delete DELARME, DIEGO Name:

10116 CHARLESTON CORNER Address: City-St-Zip: TAMPA, FL 33635 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Change () Addition SANTA ROSA, PETRE G Name: 7704 ROCK PALM AVE #202 Address:

TAMPA, FL 33615 US City-St-Zip:

Title: (X) Change () Addition

Name: DELARME, DIEGO

7704 ROCK PALM AVE #202 Address: TAMPA, FL 33615 US City-St-Zip:

Title: () Change () Addition

Name: Address: City-St-Zip:

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.

Ρ SIGNATURE: PETRE G SANTA ROSA 04/16/2008