

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000157459

FILED
Mar 31, 2005
Secretary of State

Entity Name: DE SOUZA CERAMIC TILE, INC.

Current Principal Place of Business:

3900 OLD FIELD CROSSING DR., #422
JACKSONVILLE, FL 32223

New Principal Place of Business:

Current Mailing Address:

3900 OLD FIELD CROSSING DR., #422
JACKSONVILLE, FL 32223

New Mailing Address:

FEI Number: 20-0526384

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TAX HOUSE CORPORATION
1261 E. SAMPLE RD.
POMPANO BEACH, FL 33064 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSD () Delete
Name: DE SOUZA, EDILSON M
Address: 3900 OLD FIELD CROSSING DR., #422
City-St-Zip: JACKSONVILLE, FL 32223

Title: D () Delete
Name: RODRIGUES, SANDRO R
Address: 3900 OLD FIELD CROSSING DR., #422
City-St-Zip: JACKSONVILLE, FL 32223

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Change (X) Addition
Name: TONIOLI, ABNER
Address: 3900 OLD FIELD CROSSING DR., #422
City-St-Zip: JACKSONVILLE, FL 32223

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

SIGNATURE: EDILSON M. DESOUZA

PSD

03/31/2005

Electronic Signature of Signing Officer or Director

Date