2006 FOR PROFIT CORPORATION

Apr 26, 2006 8:00 am Secretary of State ANNUAL REPORT 04-26-2006 90213 001 ***150 00 DOCUMENT # P04000008342 1. Entity Name RVD TILE, INC. 40064258 Principal Place of Business Mailing Address 6904 MANATEE AVE W 6904 MANATEE AVE W #69D #69D BRADENTON, FL 34209 BRADENTON, FL 34209 2. Principal Place of Business 3. Mailing Address 6506 14TH AVE W SAME Suite, Apt. #, etc. 03222006 Chg-P CR2E034 (11/05) City & State City & State 4. EEI Number Applied For BRADENTON, 20-0590460 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. No and Address of Current Registered Agent 7. Name and Address of New Registered Agent VAN DYKE, RANDI RVD TILE INC Street Address (P.O. Box Number is Not Acceptable) 6904 MANATEE AVE VV, # 6 BRADENTON, FL 34209 6506 14TH AVE W City Zip Code FL 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. RANDY VAN DYKE (NOTE Registered Agent signature required when reinstating) SIGNATURE. ___/___/06 Signature, typed or printed name of registered agent and title if applicable 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution After May 1, 2006 Fee will be \$550.00 Added to Fees 10. OFFICE IS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Delete TITLE Change Addition **PSTD** VAN DYKE, RANDY M NAME MAME VAN DYKE, RANDY M W #69D STREET ADDRESS 6904 MANATEE STREET ADDRESS 6506 14TH AVE W CITY-\$1-ZIP BRADENTON, F. 209 CITY-S1-ZIP BRADENTON, FL 34209 ☐ Delete TITLE ☐ Change ■ Addition MAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP City-St-ZIP TITLE ☐ Delete Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-SI-ZIP CITY-ST-ZIP ☐ Delete THE THE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE Change ☐ Addition NAME MARKE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-SI-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 of ustee 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 properties. RANDY VAN DYKE

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

☐ Delete

SIGNATURE:

TITLE

NAME

STRUET ADDRESS

CITY-ST-ZIP

RANDY VAN DYKE PRES

941-812-4944

Addition

Daytime Phone #

☐ Change

FILED