

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000008483

FILED
Jan 24, 2006
Secretary of State

Entity Name: PREMIER TILE CONTRACTORS INC

Current Principal Place of Business:

5040 MILLENIA BLVD., APT. 303
ORLANDO, FL 32839 US

New Principal Place of Business:

6135 METROWEST BLVD
UNIT 110
ORLANDO, FL 32835 US

Current Mailing Address:

5040 MILLENIA BLVD., APT. 303
ORLANDO, FL 32839 US

New Mailing Address:

6135 METROWEST BLVD
UNIT 110
ORLANDO, FL 32835 US

FEI Number: 20-0590164

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LARSON, CAROLINE
5950 LAKEHURST DR., SUITE 246
ORLANDO, FL 32819 US

Name and Address of New Registered Agent:

ACCOUNT BOOKKEEPING CORP
5950 LAKEHURST DR., SUITE 246
ORLANDO, FL 32819 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: JOSE A LEMUS

01/24/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SOARES, ANTONIO C
Address: 5040 MILLENIA BLVD., APT. 303
City-St-Zip: ORLANDO, FL 32839 US

Title: VD () Delete
Name: CASTRO, JOSE DUARTE
Address: 5120 CONROY ROAD, APT. 512
City-St-Zip: ORLANDO, FL 32811

Title: TD () Delete
Name: NETO, LOURENCO
Address: 4611 CASON COVE DR., APT. 624
City-St-Zip: ORLANDO, FL 32811

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SOARES, ANTONIO C
Address: 6135 METRO WEST BLVD UNIT 110
City-St-Zip: ORLANDO, FL 32835 US

Title: VD (X) Change () Addition
Name: CASTRO, JOSE DUARTE
Address: 6135 METRO WEST BLVD UNIT 110
City-St-Zip: ORLANDO, FL 32835 US

Title: TD (X) Change () Addition
Name: NETO, LOURENCO
Address: 6135 METRO WEST BLVD UNIT 110
City-St-Zip: ORLANDO, FL 32835 US

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

SIGNATURE: ANTONIO SOARES

PD

01/24/2006

Electronic Signature of Signing Officer or Director

Date