

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P04000009273

1. Entity Name
JSR TILES, INC.



Principal Place of Business

151 SW 18TH AVENUE
APT. #1
MIAMI, FL 33135

Mailing Address

151 SW 18TH AVENUE
APT. #1
MIAMI, FL 33135

2. Principal Place of Business

151 SW 18 Ave #1

3. Mailing Address

151 SW 18 Ave #1

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Miami FL
33135

City & State

Miami FL
33135

4. FEI Number

58-2682798

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

RIVERA, JESUS S
151 SW 18TH AVENUE
APT. #1
MIAMI, FL 33135

7. Name and Address of New Registered Agent

Name

JESUS S. RIVERA

Street Address (P.O. Box Number is Not Acceptable)

151 SW 18 Ave #1

City

Miami

FL

Zip Code
33135

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

✓ JSR

4/4/05

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

10. OFFICERS AND DIRECTORS

Delete

11.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

P
RIVERA, JESUS S
151 SW 18TH AVENUE
MIAMI, FL 33135

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

TITLE
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STREET ADDRESS
CITY-ST-ZIP

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STREET ADDRESS
CITY-ST-ZIP

Change Addition

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CITY-ST-ZIP

Change Addition

TITLE
NAME
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CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: ✓ JSR

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED
Apr 11, 2005 8:00 am
Secretary of State

04-11-2005 90174 014 ***150.00

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04042005 Chg-P CR2E034 (10/03)