

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000013817

Entity Name: PORTLAND TILE, INC.

FILED
May 05, 2006
Secretary of State

Current Principal Place of Business:

11765 LORETTO SQ DR
JACKSONVILLE, FL 32223

New Principal Place of Business:

16 RADCLIFFE DR
PALM COAST, FL 32164

Current Mailing Address:

33 BRITTANY LN # B
PALM COAST, FL 32137

New Mailing Address:

16 RADCLIFFE DR
PALM COAST, FL 32164

FEI Number: 20-0645157

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

TAX HOUSE CORPORATION
1261 E SAMPLE RD
POMPANO BCH, 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPS () Delete
Name: XAVIER, MARCOS R
Address: 33 BRITTANY LN # B
City-St-Zip: PALM COAST, FL 32137

Title: DVT () Delete
Name: XAVIER, ELAINE F
Address: 33 BRITTANY LN # B
City-St-Zip: PALM COAST, FL 32137

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change () Addition
Name: XAVIER, MARCOS R
Address: 16 RADCLIFFE DR
City-St-Zip: PALM COAST, FL 32164

Title: DVT (X) Change () Addition
Name: XAVIER, ELAINE F
Address: 16 RADCLIFFE DR
City-St-Zip: PALM COAST, FL 32164

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: MARCOS XAVIER

DPS

05/05/2006

Electronic Signature of Signing Officer or Director

_____ Date