


**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**


**FILED**  
**May 04, 2006 8:00 am**  
**Secretary of State**

05-04-2006 90218 007 \*\*\*158.75

<b>DOCUMENT # P04000017267</b>	
1. Entity Name <b>LOPEZ &amp; SON TILE, CORP.</b>	

Principal Place of Business <b>12830 NW 9TH STREET MIAMI, FL 33182</b>	Mailing Address <b>12622 NW 11 TERR MIAMI, FL 33182</b> <i>12830 NW 33182 9TH ST MIAMI FL</i>
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**DO NOT WRITE IN THIS SPACE**

	
04242006	No Chg-P CR2E034 (11/05)
4. FEI Number <b>20-0682992</b>	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent  <b>LOPEZ, ELIO</b> <b>12622 NW 11 TERR</b> <b>MIAMI, FL 33182</b> <i>12830 NW 9th St Miami FL 33182</i>
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IN THIS SPACE**

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 _____	(NOTE: Registered Agent signature required when reinstating)	DATE _____
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<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P LOPEZ, ELIO <i>12622 NW 11 TERR 12830 NW 9th St</i> MIAMI, FL 33182
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP LOPEZ, ALEXIS 12466 NW 11 LN MIAMI, FL 33182
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP LOPEZ, ELIO R JR <i>12622 NW 11 TERR 12830 NW 9th St</i> MIAMI, FL 33182
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

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 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.

<b>SIGNATURE:</b> <i>Elio Lopez</i>	<i>4/25/06</i>	<i>786 586 6423</i>
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	<small>Date</small>	<small>Daytime Phone #</small>