2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Aug 11, 2006 8:00 am Secretary of State

DOCUMENT # P04000023401 1. Entity Name JERRY TILE FLOOR SERVICE INC					08-11-2006 90002 009 ***150.00				
Principal Place of Business		Mailing Address]		F00	0 P 0 4	^
19607 OBERLY PKWY ORLANDO, FL 32833		19607 OBERLY PKWY ORLANDO, FL 32833					5007	2504	2
SAME	AS ABOUT								
2. Principal Place of Business		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.		- 11 -	07192006	Chg-P	CR2E034		
City & State		City & State			4. FEI Number 14-1903	Applied For Not Applicable			
Zip	Country	Zip Coun		try	5. Certificate of	See Required			
	6. Name and Address of Curren	t Registered Agent			7. Name and	Address of New R			
IZUENOU.	ND IEDDY			Name			- - -	,	
19607 OBI	AND , JERRY - ERLY PKWY), FL 32833			Street Address (P.O. Box Number is Not Acceptable)					
		Þ		City			FL	Zip Code	1
	named entity submits this statement ions of registered agent.	for the purpose of changing its	register	ed office or register	red agent, or both	, in the State of Flo	rida. I am fan	niliar with,	and accept
SIGNATURE	Signature, typed or printed name of registered age	nt and title if applicable. (NOT	E. Registere	d Agent signature required	i when reinstating)		DATE		
FILE NOW!!! FEE IS \$150.00 Due by September 6, 2006 9. Election Campaign Financin Trust Fund Contribution.					.00 May Be led to Fees	In accordance w corporation did	rith s. 607.19 not receive t	93(2)(b), l he prior n	F.S., the otice.
10.	OFFICERS AN	DIRECTORS	11.		ADDITIONS/0	HANGES TO OFFI		_	
TITLE NAME	P KHEMCHAND, JERRY	☐ Delete	TITLI				L	Change	Addition
STREET ADDRESS	19607 OBERLY PKWY			ET ADDRESS			-		
CITY-ST-ZIP	ORLANDO, FL 32833		CITY	-SI-ZIP					
TITLE		☐ Delete	TITLE	·				Change	Addition
NAME STREET ADDRESS			- NAM	E ET ADDRESS					
CJTY-ST-ZIP				-ST-ZIP					
TITLE		☐ Delete	TITL	£				Change	Addition
NAME			NAM						
STREET ADDRESS CITY-ST-ZIP				ET ADDRESS -ST-ZIP					
TITLE		☐ Delete	TITL					Change	☐ Addition
NAME			NAM	E					
STREET ADDRESS				ET ADORESS - S1 - ZIP					
CITY-ST-ZIP			_					7 Change	Addition
TITLE		☐ Delete	TITL				L	Change	☐ Addition
STREET ADDRESS			STRE	ET ADDRESS					
CITY-\$1-ZIP			CITY	-SI-ZIP					
TITLE		Delete	TITL	I				Change	Addition
NAME Street address			NAM STRI	EET ADDRESS					
CITY-ST-ZIP				- \$1 - ZIP					

12. Thereby certify that the information supplied with this taing does not quality 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.

SIGNATURE:

TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECT

TERRY KHEMCHANI

Daytime Phone # 407 927 5 75