2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000035893

FILED Apr 30, 2008 Secretary of State

Entity Name: CAMPUZANO TILE'S CORP. **Current Principal Place of Business: New Principal Place of Business:** 8207 SHIVER DR. ORLANDO, FL 32822 **Current Mailing Address: New Mailing Address:** 8207 SHIVER DR. ORLANDO, FL 32822 FEI Number: 20-0863709 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CAMPUZANO, JUSTINO 8207 SHIVER DR. ORLANDO, FL 32822 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Name:

Address:

Title: () Delete Title: (X) Change () Addition CAMPUZANO, JUSTINO CAMPUZANO, JUSTINO Name: Name: 8207 SHRIVES DR 8207 SHRIVES DR Address: Address: City-St-Zip: ORLANDO, FL 32822 City-St-Zip: ORLANDO, FL 32822 Title: VP (X) Change () Addition

Title: () Delete HERNANDEZ, LIDIA HERNANDEZ, LIDIA Name: 8207 SHRIVES DR 8207 SHRIVES DR Address: ORLANDO, FL 32822 ORLANDO, FL 32822 City-St-Zip: City-St-Zip:

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

Ρ SIGNATURE: JUSTINO CAMPUZANO 04/30/2008