

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000070090

Entity Name: APS TILE SERVICES, CORP.

FILED
Mar 01, 2006
Secretary of State

Current Principal Place of Business:

5540 NW EAST TORINO PKWY, SUITE 208
PORT SAINT LUCIE, FL 34986 US

New Principal Place of Business:

Current Mailing Address:

5540 NW EAST TORINO PKWY, SUITE 208
PORT SAINT LUCIE, FL 34986 US

New Mailing Address:

FEI Number: 20-1070078

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SOUZA, ANDRE
5540 NW EAST TORINO PKWY, SUITE 208
PORT SAINT LUCIE, FL 34986 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SOUZA, ANDRE
Address: 5540 NW EAST TORINO PKWY, SUITE 208
City-St-Zip: PORT SAINT LUCIE, FL 34986 US

Title: D () Delete
Name: OLIVEIRA, ALESSANDRE P
Address: 3040 LAKEVIEW DRIVE
City-St-Zip: SEBRING, FL 33870

Title: D () Delete
Name: LEITE, LEANDRO F
Address: 3040 LAKEVIEW DRIVE
City-St-Zip: SEBRING, FL 33870

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: TEIXEIRA, SERGIO D
Address: 3040 LAKEVIEW DRIVE
City-St-Zip: SEBRING, FL 33870 US

Title: D (X) Change () Addition
Name: CRUZ, ANTONIO P
Address: 3040 LAKEVIEW DRIVE
City-St-Zip: SEBRING, FL 33870 US

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: ANDRE SOUZA

PD

03/01/2006

Electronic Signature of Signing Officer or Director

Date