2005 FOR PROFIT CORPORATION

FILED Apr 04, 2005 8:00 am Secretary of State ANNUAL REPORT

DOCUMENT # P04000106835 04-04-2005 90049 039 ***150.00 KEN'S TILE APPLICATIONS, INC. Principal Place of Business Mailing Address **4211 CARSON STREET NE 4211 CARSON STREET NE** ST. PETERSBURG, FL 33703 ST. PETERSBURG, FL 33703 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03292005 · Chg-P CR2E034 (10/03) City & State City & State 4 FEI Number Applied For 02-0727091 Not Applicable 7in Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent LENNETH W. WILLIAMS CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable)
4211 CARSON STREET 1201 HAYS STREET TALLAHASSEE, FL 32301 City PETERSBURG Zip Code 33703 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 3/28/05 KENNETH W. WILLIAMS SIGNATURE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE D ☐ Detete TITLE ☐ Addition Change WILLIAMS, KENNETH W NAME NAME STREET ADDRESS **4211 CARSON STREET NE** STREET ADDRESS ST. PETERSBURG, FL 33703 CITY-ST-7IP CITY-ST-7IP TITLE Delete TITLE Change ☐ Addition NAME NAME STREET AODRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITI F Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS . CITY - ST - ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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 i changed, or on an attachment with an address, with all other like empowered.

KENNETH W. WILLIAMS

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SIGNATURE:

3/28/05 727-686-8411