


**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Aug 21, 2007 8:00 am**  
**Secretary of State**

08-06-2007 90032 043 \*\*\*150.00

<b>DOCUMENT # P04000116761</b> 1. Entity Name <b>DESIGNERS TILE INC.</b>	
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Principal Place of Business <b>7505 SW 159TH TERRACE MIAMI, FL 33157</b>	Mailing Address <b>7505 SW 159TH TERRACE MIAMI, FL 33157</b>
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**DO NOT WRITE IN THIS SPACE**

**66021249**

07302007 No Chg-P CR2E034 (11/05)

4. FEI Number <b>84-1654547</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

6. Name and Address of Current Registered Agent

**CILI, VERONICA  
7505 SW 159TH TERRACE  
MIAMI, FL 33157**

**DO NOT WRITE  
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: *Veronica Cili* (NOTE: Registered Agent signature required when reinstating) DATE: 8/10/07

<b>FILE NOW!!! FEE IS \$150.00 Due by September 14, 2007</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PW CILI, RHETT 7505 SW 159TH TERRACE MIAMI, FL 33157</b>
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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.

SIGNATURE: *Rhett Cili Pres* DATE: 8/10/07 DAYTIME PHONE: 305 573 2000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR