

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000122678

FILED
Apr 19, 2005
Secretary of State

Entity Name: COSTA BROTHERS TILE CORP

Current Principal Place of Business:

4956 CASON COVE DR
SUITE 206
ORLANDO, FL 32811 US

New Principal Place of Business:

435 S CLAYTON ST
MOUNT DORA, FL 32757 US

Current Mailing Address:

4956 CASON COVE DR
SUITE 206
ORLANDO, FL 32811 US

New Mailing Address:

435 S CLAYTON ST
MOUNT DORA, FL 32757 US

FEI Number: 20-1535591

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ACCOUNT BOOKKEEPING CORP
5950 LAKEHURST DR
SUITE 246
ORLANDO, FL 32819 US

Name and Address of New Registered Agent:

CAROLINE LARSON
5950 LAKEHURST DR
SUITE 246
ORLANDO, FL 32819 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: CAROLINE LARSON

04/19/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: COSTA, ROBERTO
Address: 4956 CASON COVE DR SUITE 206
City-St-Zip: ORLANDO, FL 32811 US

Title: VP (X) Delete
Name: COSTA, LUIZ A
Address: 4956 CASON COVE DR SUITE 206
City-St-Zip: ORLANDO, FL 32811 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: COSTA, LUIZ A
Address: 435 S CLAYTON ST
City-St-Zip: MOUNT DORA, FL 32757 US

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: LUIZ A COSTA

DP

04/19/2005

Electronic Signature of Signing Officer or Director

Date