2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2005
Secretary of State

DOCUMENT# P04000123561

Entity Name: ALL TILE & WORKS, INC.

Current Principal Place of Business:

4291 PLANTATION COVE DR
ORLANDO, FL 32810

New Principal Place of Business:

509 HERRING GULL CT
OCOEE, FL 34761

Current Mailing Address:

4291 PLANTATION COVE DR
ORLANDO, FL 32810

New Mailing Address:

509 HERRING GULL CT
OCOEE, FL 34761

FEI Number: 20-1556981 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PARRA, LILIANA S
4291 PLANTATION COVE DR
ORLANDO, FL 32810 US

Name and Address of New Registered Agent:

PARRA, LILIANA S
509 HERRING GULL CT
OCOEE, FL 34761 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: 05/01/2005
Electronic Signature of Registered Agent — Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: PARRA, LILIANA S
Address: 4291 PLANTATION COVE DR
City-St-Zip: ORLANDO, FL 32810

Title: VP ( ) Delete
Name: PARRA, JUAN
Address: 4291 PLANTATION COVE DR
City-St-Zip: ORLANDO, FL 32810

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: PARRA, LILIANA S
Address: 509 HERRING GULL CT
City-St-Zip: OCOEE, FL 34761

Title: VP (X) Change ( ) Addition
Name: PARRA, JUAN
Address: 509 HERRING GULL CT
City-St-Zip: OCOEE, FL 34761

Title: SEC ( ) Change (X) Addition
Name: SANCHEZ, JAIME
Address: 509 HERRING GULL CT
City-St-Zip: OCOEE, FL 34761

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: LILIANA S. PARRA P 05/01/2005
Electronic Signature of Signing Officer or Director — Date