

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 11, 2006 8:00 am
Secretary of State

04-26-2006 90189 019 ***150.00

DOCUMENT # P04000125093 1. Entity Name E & B TILE INC																																																																																																															
Principal Place of Business 355 CORSICA CT. KISSIMMEE, FL 34758		Mailing Address PO BOX 421841 KISSIMMEE, FL 34742																																																																																																													
2. Principal Place of Business 621 Lynnet Ct. Suite, Apt. #, etc.		3. Mailing Address 5312 Sunset Canyon Dr. Suite, Apt. #, etc.																																																																																																													
City & State Kissimmee, FL Zip 34759		City & State Kissimmee, FL Zip 3475801701																																																																																																													
4. FEI Number 20-1709734		Applied For <input type="checkbox"/> Not Applicable																																																																																																													
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required																																																																																																													
6. Name and Address of Current Registered Agent CORTES, EDWIN 2006 MICHIGAN AVE KISSIMMEE, FL 34744		7. Name and Address of New Registered Agent Name Carmen Cortes Street Address (P.O. Box Number is Not Acceptable) 5312 Sunset Canyon Dr. City Kissimmee FL Zip Code 34758-1701																																																																																																													
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 <u>Carmen Cortes / Carmen Cortes - Bookkeeper</u> DATE <u>5/9/06</u> <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>																																																																																																															
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																																																																																																													
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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: Edwin Cortes, President <u>[Signature]</u> Date <u>5/24/06</u> Daytime Phone # <u>(407) 436-5309</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>																																																																																																															