## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000132075

Entity Name: ANACONDA TILE, INC.

FILED May 22, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

4930 W. WHALERS WAY 5800 UNIVERSITY BLVD ORLANDO, FL 32822

217

JACKSONVILLE, FL 32216 US

**Current Mailing Address: New Mailing Address:** 

4930 W. WHALERS WAY 5800 UNIVERSITY BLVD

ORLANDO, FL 32822

JACKSONVILLE, FL 32216 US

FEI Number: 20-1625678 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ROCHA, MARIA A. N SHOCKMEDIA CORPORATION 4930 W. WHALERS WAY 7862 W IRLO BRONSON HWY ORLANDO, FL 32822

KISSIMMEE, FL 34747 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: JOSE JARDIM JUNIOR 05/22/2006

> 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:**

( ) Delete

DPST

Title:

Title: (X) Change ( ) Addition NOGUEIRA ROCHA, MARIA A Name:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

NOGUEIRA ROCHA, MARIA A Name: 4930 W. WHALERS WAY Address: 5800 UNIVERSITY BLVD, #217 Address: City-St-Zip: ORLANDO, FL 32822 City-St-Zip: JACKSONVILLE, FL 32216 US

Title: () Delete Title: VΡ ( ) Change (X) Addition

Name: Name: DA SILVA, ROBERTO Address: Address: 5800 UNIVERSITY BLVD, #217 JACKSONVILLE, FL 32216 US City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: MARIA A. NOGUEIRA ROCHA **DPST** 05/22/2006