2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000134958

Entity Name: THE TILE COMPANEE, INC

FILED Jul 10, 2007 Secretary of State

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

604 GARDENS DR 2967 S CARAMBOLA CR APT # 203 COCONUT CREEK, FL 33066

POMPANO BEACH, FL 33069

New Mailing Address: Current Mailing Address:

604 GARDENS DR 2967 S CARAMBOLA CR APT # 203 COCONUT CREEK, FL 33066

POMPANO BEACH, FL 33069

FEI Number: 20-1674120 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

FLANDEZ, GUGLIA FLANDEZ, GUGLIA 604 GARDENS DR 604 GARDENS DR

APT #203 APT #101

POMPANO BEACH, FL 33069 US POMPANO BEACH, FL 33069 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: GUGLIA FLANDEZ 07/10/2007

> 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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

FLANDEZ, GUGLIA FLANDEZ, GUGLIA Name: Name: 604 GRADENS DR /APT. 203 604 GRADENS DR /APT. 101 Address: Address: City-St-Zip: POMPANO BEACH, FL 33069 City-St-Zip: POMPANO BEACH, FL 33069

Title: Title: (X) Change () Addition () Delete GUZMAN, ZOILA E Name: Name: GUZMAN, ZOILA E

604 GARDENS DR /APT 203 604 GARDENS DR /APT 101 Address: Address: POMPANO BEACH, FL 33069 POMPANO BEACH, FL 33069 City-St-Zip: City-St-Zip:

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

PENA, CLAUDIO PENA, CLAUDIO Name: Name:

604 GARDENS DR /APT 203 604 GARDENS DR /APT 101 Address: Address:

City-St-Zip: POMPANO BEACH, FL 33069 City-St-Zip: POMPANO BEACH, FL 33069

I hereby certify that the information supplied with this filing does not qualify 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: GUGLIA FLANDEZ **PRES** 07/10/2007