

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000143531

FILED  
May 20, 2008  
Secretary of State

Entity Name: CUBAN TROPICAL TILE CO

**Current Principal Place of Business:**

3632 NW 37 AV  
MIAMI, FL 33142

**New Principal Place of Business:**

**Current Mailing Address:**

3632 NW 37 AV  
MIAMI, FL 33142

**New Mailing Address:**

FEI Number: 20-1761543

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MORENO, MANUEL A  
11536 SW 6 ST  
MIAMI, FL 33174 US

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

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: \_\_\_\_\_

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: MORENO, MANUEL A  
Address: 11536 SW 6 ST  
City-St-Zip: MIAMI, FL 33174

Title: S ( ) Delete  
Name: MORENO, MARIA  
Address: 11536 SW 6 ST  
City-St-Zip: MIAMI, FL 33174

Title: T ( ) Delete  
Name: MILLON, ROBERTO  
Address: 870 SW 3 ST. APT. 1  
City-St-Zip: MIAMI, FL 33130

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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: MANUEL A. MORENO

P

05/20/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date