

Hurricane Katrina - Wilma

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 04, 2006 08:00 AM Secretary of State

DOCUMENT # P04000154509

1. Entity Name RICARDO CAMPOS TILE & MARBLE, INC.



Principal Place of Business 21225 NE 9TH COURT 3 NORTH MIAMI BEACH, FL 33179

Mailing Address 21225 NE 9TH COURT 3 NORTH MIAMI BEACH, FL 33179



04272006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 35-2241526 Applied For Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CAMPOS, RICARDO C 21225 NE 9TH COURT 3 NORTH MIAMI BEACH, FL 33179

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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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

Table with 2 columns: TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP. Row 1: P, CAMPOS, RICARDO C, 21225 NE 9TH COURT #3, NORTH MIAMI BEACH, FL 33179.

00000565188 05/20/06-80117-002 150.00

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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 persons empowered.

SIGNATURE: [Handwritten Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/06

Date

Daytime Phone #