2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 30, 2008
Secretary of State

DOCUMENT# P05000004498

Entity Name: M.V. TILE INSTALLATION SERVICES, INC.

Current Principal Place of Business:

204 VOGUE ST
FT PIERCE, FL 34947 US

New Principal Place of Business:

398 SE EVERGREEN TERRACE
PORT ST. LUCIE, FL 34983 US

Current Mailing Address:

204 VOGUE ST
FT PIERCE, FL 34947

New Mailing Address:

398 SE EVERGREEN TERRACE
PORT ST. LUCIE, FL 34983 US

FEI Number: 30-0292665 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

VELOZO, OBERDAN M
204 VOGUE ST
FT PIERCE, FL 34947 US

Name and Address of New Registered Agent:

VELOZO, OBERDAN M
398 SE EVERGREEN TERRACE
PORT ST. LUCIE, FL 34983 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: OBERDAN M. VELOZO 07/30/2008
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: PD ( ) Delete
Name: VELOZO, OBERDAN M
Address: 204 VOGUE ST
City-St-Zip: FT PIERCE, FL 34947 US

Title: VPD ( ) Delete
Name: VELOSO, WESCLEY F
Address: 215 MADES DR
City-St-Zip: FT PIERCE, FL 34947 US

Title: D ( ) Delete
Name: SILVA, LUAN P
Address: 212 ROCKLAND DR
City-St-Zip: FT PIERCE, FL 34947 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: VELOZO, OBERDAN M
Address: 398 SE EVERGREEN TERRACE
City-St-Zip: PORT ST. LUCIE, FL 34983 US

Title: VPD (X) Change ( ) Addition
Name: VELOSO, WESCLEY F
Address: 398 SE EVERGREEN TERRACE
City-St-Zip: PORT ST. LUCIE, FL 34983 US

Title: D (X) Change ( ) Addition
Name: ZANNE, FABIO
Address: 1162 FLORESTA DR.
City-St-Zip: PORT ST. LUCIE, FL 34983 US

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: OBERDAN M .VELOZO PD 07/30/2008
Electronic Signature of Signing Officer or Director Date