

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000006982

Entity Name: FLORIDA KING TILE, INC.

FILED  
Apr 26, 2006  
Secretary of State

## Current Principal Place of Business:

2803 W SLIGH AVENUE  
1102  
TAMPA, FL 33614

## New Principal Place of Business:

7001 CONTINENTAL DR  
D  
TAMPA, FL 33614

## Current Mailing Address:

2803 W SLIGH AVENUE  
1102  
TAMPA, FL 33614

## New Mailing Address:

7001 CONTINENTAL DR  
D  
TAMPA, FL 33614

FEI Number: 20-2161088

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

UTRA, ABEL  
2803 W SLIGH AVENUE  
1102  
TAMPA, FL 33614 US

## Name and Address of New Registered Agent:

UTRA, ABEL  
7001 CONTINENTAL DR  
D  
TAMPA, FL 33614 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: FRANK MARTINEZ

04/26/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: UTRA, ABEL B  
Address: 2803 W SLIGH AVENUE, 1102  
City-St-Zip: TAMPA, FL 33614

Title: VP ( ) Delete  
Name: UTRA, ABEL B  
Address: 2803 W SLIGH AVENUE, 1102  
City-St-Zip: TAMPA, FL 33614

Title: S ( ) Delete  
Name: UTRA, ABEL B  
Address: 2803 W SLIGH AVENUE, 1102  
City-St-Zip: TAMPA, FL 33614

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: UTRA, ABEL B  
Address: 7001 CONTINENTAL DR  
City-St-Zip: TAMPA, FL 33614

Title: VP (X) Change ( ) Addition  
Name: UTRA, ABEL B  
Address: 7001 CONTINENTAL DR  
City-St-Zip: TAMPA, FL 33614

Title: S (X) Change ( ) Addition  
Name: UTRA, ABEL B  
Address: 7001 CONTINENTAL DR  
City-St-Zip: TAMPA, FL 33614

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: ABEL B UTRA

P

04/26/2006

Electronic Signature of Signing Officer or Director

Date