## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000059607

City-St-Zip:

CAPE CORAL, FL 33904

**Entity Name: US TILE CORPORATION** 

FILED Mar 03, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 152 CARLISLE AVE S 3715 36TH ST SW LEHIGH ACRES, FL 33936 LEHIGH ACRES, FL 33976` **Current Mailing Address: New Mailing Address:** 152 CARLISLE AVE S 3715 36TH ST SW LEHIGH ACRES, FL 33936 LEHIGH ACRES, FL 33976` FEI Number: 20-2731163 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: TAX HOUSE CORPORATION 1261 E SAMPLE RD POMPANO BCH, FL 33064 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change ( ) Addition PINHEIRO, DEIVIS PINHEIRO, ALYSSA Name: Name: 152 CARLISLE AVE S 152 CARLISLE AVE S Address: Address: City-St-Zip: LEHIGH ACRES, FL 33936 City-St-Zip: LEHIGH ACRES, FL 33974 VΡ Title: VΡ Title: () Delete (X) Change ( ) Addition PINHEIRO, FLORIANO Name: Name: PINHEIRO, DEIVIS 152 CARLISLE AVE S 152 CARLISLE AVE S Address: Address: LEHIGH ACRES, FL 33936 LEHIGH ACRES, FL 33974 City-St-Zip: City-St-Zip: Title: Title: ( ) Delete () Change () Addition PINTO, ERIC Name: Name: 3622 SE 3RD AVE Address: Address: City-St-Zip: CAPE CORAL, FL 33904 City-St-Zip: Title: ( ) Delete Title: (X) Change ( ) Addition ANDRADE, FELIPE PINHEIRO, FLORIANO P Name: Name: Address: 3622 SE 3RD AVE Address: 152 CARLISLE AVE

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.

City-St-Zip:

LEHIGH ACRES, FL 33974

SIGNATURE: ALYSSA S PINHEIRO P 03/03/2008