

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000062775

Entity Name: WOM TILE, CORP.

FILED
Mar 30, 2007
Secretary of State

Current Principal Place of Business:

641 NW SELVITZ RD
PORT ST. LUCIE, FL 34983 US

New Principal Place of Business:

379 SW MAJESTIC TERR
PORT ST. LUCIE, FL 34984 US

Current Mailing Address:

641 NW SELVITZ RD
PORT ST. LUCIE, FL 34983 US

New Mailing Address:

379 SW MAJESTIC TERR
PORT ST. LUCIE, FL 34984 US

FEI Number: 20-2760942

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TAXPLACE CORP
2721 S. US 1 SUITE 9
FORT PIERCE, FL 34982 US

Name and Address of New Registered Agent:

MARTINS, WESLEY O
379 SW MAJESTIC TERR
PORT ST LUCIE, FL 34984 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: WESLEY O MARTINS

03/30/2007

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: MARTINS, WESLEY O
Address: 641 NW SELVITZ RD
City-St-Zip: PORT ST. LUCIE, FL 34983 US

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MARTINS, WESLEY O
Address: 379 SW MAJESTIC TERR
City-St-Zip: PORT ST. LUCIE, FL 34984 US

Title: VP/D () Change (X) Addition
Name: MARTINS, ELIEL O
Address: 379 SW MAJESTIC TERR
City-St-Zip: PORT ST LUCIE, FL 34984 US

Title: D () Change (X) Addition
Name: RIBEIRO, ADIEL M
Address: 379 SW MAJESTIC TERR
City-St-Zip: PORT ST LUCIE, FL 34984 US

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: WESLEY OLIVEIRA MARTINS

PD

03/30/2007

Electronic Signature of Signing Officer or Director

Date