

FILED
Aug 16, 2007 8:00 am
Secretary of State

07-13-2007 90089 042 ***150.00

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P05000066002			
1. Entity Name TILE DUONG TRUONG, INC.			
Principal Place of Business 12955 PINE FORREST WAY WEST LARGO, FL 33773		Mailing Address 12955 PINE FORREST WAY WEST LARGO, FL 33773	
2. Principal Place of Business - No P.O. Box # 12955 Pine Forrest Way		3. Mailing Address 12955 Pine Forrest Way	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Largo FL		City & State Largo, FL	
Zip 33773	County Pinellas	Zip 33773	County Pinellas
4. FEI Number 01-0834764		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 (FPOB: Registered Agent signature required when renewing) DATE _____			
FILE NOW!!! FEE IS \$150.00 Due by September 14, 2007		9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	PSTD TRUONG, DUONG 12955 PINE FORREST WAY WEST LARGO, FL 33773 ☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D LUONG, MUOI 12955 PINE FORREST WAY WEST LARGO, FL 33773 ☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
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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 like empowered.			
SIGNATURE: <u><i>Tile Duong Truong</i></u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date: <u>8-13-07</u> Date	