2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000117209

JACKSONVILLE, FL 32257 US

JACKSONVILLE, FL 32257 US

GONCALVES, LEANDRO

4295 SUNBEAM ROAD

(X) Delete

City-St-Zip:

Title:

Name:

Address:

City-St-Zip:

FILED May 17, 2007 Secretary of State

Entity Nar	ne: W.L.J. TILE	INSTALLERS, CORP.				
Current Principal Place of Business:			New Princ	New Principal Place of Business:		
4915 BAYN #11C	MEADOWS RD.					
	VILLE, FL 32217	7 US				
Current Mailing Address:			New Maili	New Mailing Address:		
	MEADOWS RD.					
#11C JACKSON	VILLE, FL 32217	7 US				
FEI Number:	20-3347670	FEI Number Applied For ()	FEI Number Not App	licable ()	Certificate of Status Desired ()	
Name and	Address of Cu	rrent Registered Agent:	Name and	Address o	of New Registered Agent:	
7862 W IR 121 KISSIMME The above	EDIA CORPORA LO BRONSON F E, FL 34747 US named entity su e of Florida.	HWY S	purpose of changing i	ts registere	d office or registered agent, or both,	
SIGNATUF	RE:					
	Electronic	Signature of Registered Ag	ent		Date	
	•	2)(b), F.S., the corporation did n rust Fund Contribution ().	ot receive the prior notic	e.		
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	P () D LIMA, WELLINGT 4295 SUNBEAM F JACKSONVILLE, I	ON ROAD #206	Title: Name: Address: City-St-Zip:		(X) Change ()Addition LINGTON IEADOWS RD. #11C ILLE, FL 32217 US	
Title: Name: Address:	S () D OLIVEIRA, JEAN 4295 SUNBEAM F		Title: Name: Address:	S ALMEIDA, 0 4915 BAYM	(X) Change () Addition CRISTIANO IEADOWS RD. #11C	

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:

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: WELLINGTON LIMA Ρ 05/17/2007

JACKSONVILLE, FL 32217 US

() Change () Addition