2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P05000141485

Entity Name: SILVIO TILE SYSTEM CORP

FILED Sep 04, 2006 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
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201 BERRY TREE PL 10305 LIONS AV

BLDG 12 LITHIA, FL 33547 US US

BRANDON, FL 33510

New Mailing Address: Current Mailing Address:

201 BERRY TREE PL 10305 LIONS AV

BLDG 12 LITHIA, FL 33547 US BRANDON, FL 33510 US

FEI Number: 20-3656758 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:

REIS, SILVIO S REIS, SILVIO S 10305 LIONS AV 201 BERRY TREE PL US BLDG 12 LITHIA, FL 33547

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: SILVIO S REIS 09/04/2006

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

BRANDON, FL 33510 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

REIS, SILVIO S REIS, SILVIO S Name: Name: 201 BERRY TREE PL BLDG 12 Address: 10305 LIONS AV Address: City-St-Zip: BRANDON, FL 33510 US City-St-Zip: LITHIA, FL 33547 US

() Delete Title: Title: (X) Change () Addition

MIRANDA, VALDIR R Name: REIS. VANUSA H Name: 201 BERRY TREE PL Address: 226 RED CEDAR PLACE Address: BRANDON, FL 33510 US BRANDON, FL 33510 US City-St-Zip: City-St-Zip:

Title: Title: () Change (X) Addition () Delete

Name: SILVA, REINALDO F Name: 219 BERRY TREE PLACE Address Address: City-St-Zip: City-St-Zip: BRANDON, FL 33510

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.

Ρ SIGNATURE: SILVIO S REIS 09/04/2006