

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000143887

Entity Name: LYNX GENERATE TILE, CO.

FILED
Feb 07, 2006
Secretary of State

Current Principal Place of Business:

5166 MILLENIA BLVD
308
ORLANDO, FL 32839

New Principal Place of Business:

5166 MILLENIA BLVD
308
ORLANDO, FL 32839 US

Current Mailing Address:

5166 MILLENIA BLVD
308
ORLANDO, FL 32839

New Mailing Address:

5166 MILLENIA BLVD
308
ORLANDO, FL 32839 US

FEI Number: 20-3676539

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHOCKMEDIA CORPORATION
7862 W IRLO BRONSON HWY
121
KISSIMMEE, FL 34747 US

Name and Address of New Registered Agent:

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:

Title: P () Delete
Name: TEIXEIRA, PAULO C
Address: 5166 MILLENIA BLVD #308
City-St-Zip: ORLANDO, FL 32839

Title: VP () Delete
Name: SOUZA, NILSON
Address: 5166 MILLENIA BLVD #308
City-St-Zip: ORLANDO, FL 32839

Title: S (X) Delete
Name: SANTOS, DAIR
Address: 5166 MILLENIA BLVD #308
City-St-Zip: ORLANDO, FL 32839

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PS (X) Change () Addition
Name: TEIXEIRA, PAULO C
Address: 5166 MILLENIA BLVD #308
City-St-Zip: ORLANDO, FL 32839

Title: PT (X) Change () Addition
Name: SOUZA, NILSON
Address: 5166 MILLENIA BLVD #308
City-St-Zip: ORLANDO, FL 32839

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: NILSON SOUZA

P

02/07/2006

Electronic Signature of Signing Officer or Director

Date