2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P06000005872

Entity Name: PARANA TILES, INC

FILED Aug 19, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1489 S. KIRKMAN APT. 1095 ORLANDO, FL 32811 US

Current Mailing Address: New Mailing Address:

1489 S. KIRKMAN APT. 1095 ORLANDO, FL 32811 US

FEI Number: 20-4121740 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

PAIVA, JOSE M PD 1489 S KIRKMAN RD 1489 S KIRKMAN RD #1195 #1195

ORLÁNDO, FL 32811 US ORLÁNDO, FL 32811 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: JOSE MOREIRA PAIVA 08/19/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 PAIVA, JOSE M
 Name:
 PAIVA, JOSE M PD

 Address:
 1489 S. KIRKMAN APT 1095
 Address:
 1489 S. KIRKMAN APT 1095

City-St-Zip: ORLANDO, FL 32811 US City-St-Zip: ORLANDO, FL 32811 US

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

 Name:
 Name:
 JESUS, EDUARDO A VP

 Address:
 Address:
 1481 S. KIRKMAN RD APT: 3085

 City-St-Zip:
 City-St-Zip:
 ORLANDO, FL 32811 US

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

 Name:
 Name:
 SOARES, IDVINO B D

 Address:
 Address:
 1481 S. KIRKMAN RD APT: 3085

 City-St-Zip:
 City-St-Zip:
 ORLANDO, FL 32811 US

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.

SIGNATURE: JOSE MOREIRA PAIVA PD 08/19/2008