

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000047296

Entity Name: POLANCO TILE, INC.

FILED
Jul 30, 2009
Secretary of State

Current Principal Place of Business:

612 DEL AIRES CT.
KISSIMMEE, FL 34758

New Principal Place of Business:

217 APPLEWOOD CT
KISSIMMEE, FL 34743

Current Mailing Address:

612 DEL AIRES CT.
KISSIMMEE, FL 34758

New Mailing Address:

217 APPLEWOOD CT
KISSIMMEE, FL 34743

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

POLANCO, VIRGILIO
612 DEL AIRES CT.
KISSIMMEE, FL 34758 US

Name and Address of New Registered Agent:

POLANCO, VIRGILIO
217 APPLEWOOD CT
KISSIMMEE, FL 34743 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: VIRGILIO POLANCO

07/30/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPST () Delete
Name: POLANCO, VIRGILIO
Address: 612 DEL AIRES CT.
City-St-Zip: KISSIMMEE, FL 34758

Title: D () Delete
Name: POLANCO, SAMUEL
Address: 612 DEL AIRES CT.
City-St-Zip: KISSIMMEE, FL 34758

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST (X) Change () Addition
Name: POLANCO, VIRGILIO
Address: 217 APPLEWOOD CT
City-St-Zip: KISSIMMEE, FL 34743

Title: D (X) Change () Addition
Name: POLANCO, SAMUEL
Address: 217 APPLEWOOD CT
City-St-Zip: KISSIMMEE, FL 34743

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: SAMUAL POLANCO

D

07/30/2009

Electronic Signature of Signing Officer or Director

Date