2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2007
Secretary of State

DOCUMENT# P06000083400

Entity Name: MATRIX TILE, INC.

Current Principal Place of Business:

800 S. SHEELER RD.
APOPKA, FL 32703 US

New Principal Place of Business:

815 CHESTNUT AVE.
ORANGE CITY, FL 32763 US

Current Mailing Address:

P.O. BOX 196757
WINTER SPRINGS, FL 32719 US

New Mailing Address:

815 CHESTNUT AVE
ORANGE CITY, FL 32763 US

FEI Number: 20-5078246 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KILGORE, ROBERT L
800 S.SHEELER RD.
APOPKA, FL 32703 US

Name and Address of New Registered Agent:

KILGORE, ROBERT L
815 CHESTNUT AVE
ORANGE CITY, FL 32763 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: 04/27/2007
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PVST ( ) Delete
Name: KILGORE, ROBERT
Address: P.O. BOX 196757
City-St-Zip: WINTER SPRINGS, FL 32719 US

Title: D ( ) Delete
Name: KILGORE, ROBERT
Address: P.O. BOX 196757
City-St-Zip: WINTER SPRINGS, FL 32719 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVST (X) Change ( ) Addition
Name: KILGORE, ROBERT
Address: 815 CHESTNUT AVE
City-St-Zip: ORANGE CITY, FL 32763 US

Title: D (X) Change ( ) Addition
Name: KILGORE, ROBERT
Address: 815 CHESTNUT AVE
City-St-Zip: ORANGE CITY, FL 32763 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: ROBERT KILGORE PVST 04/27/2007
Electronic Signature of Signing Officer or Director — Date