2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000103348

Entity Name: BS TILE INSTALLATION INC

FILED Nov 04, 2008 Secretary of State

Current Principa	al Place of Business:	New Principal Place of Business:

5713 RIDGE CLUB LOOP 4629 CASON COVE DR

APT 107 APT 1524

ORLANDO, FL 32839 US ORLANDO, FL 32811 US

Current Mailing Address: New Mailing Address:

5713 RIDGE CLUB LOOP 4629 CASON COVE DR APT 107 APT 1524

APT 107 APT 1524 ORLANDO, FL 32839 US ORLANDO, FL 32811 US

FEI Number: 20-5358877 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:

MAYORGA, AUGUST C
243 W KENNEDY BLVD
SUITE C
ORLANDO, FL 32810 US
LARSON ACCOUNTING & CONSULTING SERVICES LL
8818 COMMODITY CIR
SUITE 40
ORLANDO, FL 32819 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: CAROLINE LARSON 11/04/2008

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:

ORLANDO, FL 32839 US

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

ORLANDO, FL 32811 US

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

 Name:
 DUTRA SOARES, GIL
 Name:

 Address:
 5713 RIDGE CLUB LOOP
 Address:

 City-St-Zip:
 ORLANDO, FL 32839 US
 City-St-Zip:

Title:VP() DeleteTitle:P(X) Change () AdditionName:DUTRA-BARBOSA, RENATOName:BARBOSA, RENATO DAddress:5713 RIDGE CLUB LOOPAddress:4629 CASON COVE DR APT 1524

 City-St-Zip:
 ORLANDO, FL 32839 US
 City-St-Zip:
 ORLANDO, FL 32811 US

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

Name: DALTON SOARES-CAITAN, O Name: SOARES, CAITANO D
Address: 5713 RIDGE CLUB LOOP Address: 4629 CASON COVE DR APT 1524

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.

City-St-Zip:

SIGNATURE: RENATO D BARBOSA P 11/04/2008