

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000011243

Entity Name: JPK TILE CORP

FILED
Apr 24, 2009
Secretary of State

Current Principal Place of Business:

1089 S. KIRKMAN ROAD, APT. 208
ORLANDO, FL 32811 US

New Principal Place of Business:

Current Mailing Address:

1089 S. KIRKMAN ROAD, APT. 208
ORLANDO, FL 32811 US

New Mailing Address:

FEI Number: 20-8311252

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LARSON, CAROLINE
8818 COMMODITY CIR
STE 40
ORLANDO, FL 32819 US

Name and Address of New Registered Agent:

LARSON ACCOUNTING & CONSULTING SERVICES LL
8810 COMMODITY CIR
STE 17
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

04/24/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: KOVALHCZUK, JOAO PAULO
Address: 1089 S. KIRKMAN ROAD, APT. 208
City-St-Zip: ORLANDO, FL 32811 US

Title: VP () Delete
Name: KOVALHCZUK, ELARIO
Address: 1089 S. KIRKMAN RD APT 208
City-St-Zip: ORLANDO, FL 32811 US

Title: T () Delete
Name: FERNANDES, THIAGO
Address: 1089 S. KIRKMAN RD APT 207
City-St-Zip: ORLANDO, FL 32811 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: JOAO PAULO KOVALHCZUK

P

04/24/2009

Electronic Signature of Signing Officer or Director

Date