# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Mar 27, 2011**
**Secretary of State**

DOCUMENT# P07000119369

**Entity Name:** AAA - QUALITY TILE, CORP.

**Current Principal Place of Business:**

9539 BROKEN OAK BLVD
JACKSONVILLE, FL 32257 US

**New Principal Place of Business:**

**Current Mailing Address:**

9539 BROKEN OAK BLVD
JACKSONVILLE, FL 32257 US

**New Mailing Address:**

**FEI Number: 26-1177790** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

MIRANDA, FREDE
9539 BROKEN OAK BLVD
JACKSONVILLE, FL 32257 US

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

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: _____
Electronic Signature of Registered Agent Date

**OFFICERS AND DIRECTORS:**

Title: P
Name: MIRANDA, FREDE
Address: 9539 BROKEN OAK BLVD
City-St-Zip: JACKSONVILLE, FL 32257 US

Title: VP
Name: SOUZA, JOSE G
Address: 9539 BROKEN OAK BLVD
City-St-Zip: JACKSONVILLE, FL 32257 US

I hereby 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 all other like empowered.

SIGNATURE: FREDE MIRANDA P 03/27/2011
Electronic Signature of Signing Officer or Director Date