

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000068644

FILED
Jun 15, 2009
Secretary of State

Entity Name: SCHIRMER TILE SERVICES, INC.

Current Principal Place of Business:

2040 MARAVILLA CIRCLE
FORT MYERS, FL 33901

New Principal Place of Business:

3840 CENTRAL AVENUE
APT.# 204
FORT MYERS, FL 33901

Current Mailing Address:

2040 MARAVILLA CIRCLE
FORT MYERS, FL 33901

New Mailing Address:

3840 CENTRAL AVENUE
APT.# 204
FORT MYERS, FL 33901

FEI Number: 26-3011010

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MADE IN BRAZIL SERVICES, INC.
3828 WOODSIDE AVENUE
FORT MYERS, FL 33916 US

Name and Address of New Registered Agent:

MADE IN BRAZIL INSURANCE AND SERVICES AGEN
2301 FOWLER STREET
3
FORT MYERS, FL 33901 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: MARIA M. CALDAS-LOPES

06/15/2009

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: P () Delete
Name: DE OLIVEIRA, SILVANO S
Address: 2040 MARAVILLA CIRCLE
City-St-Zip: FORT MYERS, FL 33901

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: DE OLIVEIRA, SILVANO S
Address: 3840 CENTRAL AVENUE APT.# 204
City-St-Zip: FORT MYERS, FL 33901

Title: VP () Change (X) Addition
Name: SILVA, JESIOMAR B
Address: 3002 PALMETTO OAK DRIVE
City-St-Zip: FORT MYERS, FL 33916

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: SILVANA S. DE OLIVEIRA

P

06/15/2009

Electronic Signature of Signing Officer or Director

Date