2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 12, 2008 8:00 am Secretary of State 03-12-2008 90032 031 ***150.00

1. Entity Nan	MENT # P930000047 TILE, INC.	770			03-12-20	08 90032 031 ***1	50.00	
Principal Plac 1171 SIRUS SARASOTA, I		Mailing Address 1171 SIRUS TRAIL SARASOTA, FL 34232	1	4004	3/34		•	
		<u> </u>	·					
. •					3 O.J.III OOKA 8 JAN 1000 10011 6111611			
C	O NOT WRITE	ĈE	02192008 4. FEI Numb 65-038		CR2E034 (11/05)			
				of Status Desired	\$8.75 Addition	plicable nal		
	6. Name and Address of Current Re	gistured Agent_				Fee Required		
WHITE, G	JS TRAIL	_DO_NOT_WRITE						
SARASOTA, FL 34232			IN THIS SPACE					
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. I am familiar with, and accept								
the obligations of registered agent. SIGNATURE								
Signature, typed or printed name of registered signat and late if expectable. (NOTE: Registered Agont signature required when revisitating) DATE								
FILE NOWIII FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees								
10.	OFFICERS AND DI	RECTORS	1					
KAME	WHITE, GREG						İ	
STREET ADORESS CITY-S1-ZIF	1171 SIRUS TRAIL SARASOTA, FL 34232							
TITLE ***			1					
NAME Street address							l	
CITY-ST-ZIP	<u> </u>							
TITLE NAME	_				.•			
STREET ADORESS CITY-ST-ZIP				DO NOT WRITE				
MILE					THIS SP		ĺ	
NAME Street audress	•				<u>.</u> 1 <u>.11</u> 0_0_1.		-	
CITY-ST-ZIP								
TITLE !							İ	
STREET ADDRESS CITY-ST-ZIP								
ITILE					·			
NAME CONSEL ADDRESS		į						
STREET ADDRESS CITY-ST-ZIP							- 1	
12. Thereby certify that the information supplied with this fiting does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under eath; 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with a other like empowered.								
SIGNATURE: SIGNATURE AND TYPED OR PROVIDED HAME OF SIGNING OFFICER OR DIRECTOR DOWN Daylors Provide of Daylo								