2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jan 18, 2008 08:00 AM Secretary of State **DOCUMENT # P94000042429** SANG TILE, INC. Principal Place of Business Mailing Address 10705 ELAND STREET SANG TROUNG BOCA RATON, FL 33428 10705 ELAND STREET BOCA RATON, FL 33428 No Chg-P CR2E034 (11/05) 01142008 Applied For 4. FEI Number 65-0493374 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent DO NOT WRITE TRUONG, SANG MINH 10705 ELAND ST BOCA RATON, FL 33428 IN THIS SPACE 8. 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. (NOTE, Registered Agent signature required when teinstating) 9. Election Campaign Financing , \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. . . After May 1, 2008 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. TITLE TRUONG, SANG M NAME STREET ADDRESS 10705 ELAND STREET CITY-ST-ZIP BOCA RATON, FL 33428 oi/[8/08-80033-024 iso.oo TETLE TRAN, NHON VAN NAME STREET ADDRESS 10670 EMBER ST. CITY-ST-ZIP BOCA RATON, FL 33428 TITLE NGUYEN, KY THANH NAME STREET ADDRESS 10760 EMPEROR ST. DO NOT WRITE CITY-ST-ZIP BOCA RATON, FL 33428 IN THIS SPACE TITLE NAME STREET ADDRESS CITY - ST - ZIP NAME

12. I hereby certify that the information supplied with this filing 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 oath; that I am an officer or director of the corporation or the requirer 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 all other like empowered.

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

TURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #