2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000035861

Entity Name: PANDO TILE, INC.

City-St-Zip:

SPRING HILL, FL 34610 US

FILED Mar 24, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 6826 S. MACDILL AVENUE TAMPA, FL 33611 **Current Mailing Address: New Mailing Address:** 6826 S. MACDILL AVENUE TAMPA, FL 33611 FEI Number: 59-3375801 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PANDO, JOHN M 4737 VÁSCONIA STREET TAMPA, FL 33629 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 Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition PANDO, JOHN M Name: Name: 4737 VASCONIA STREET Address: Address: City-St-Zip: TAMPA, FL 33629 US City-St-Zip: Title: Title: () Change () Addition () Delete Name: PANDO, MARION Name: 4737 VASCONIA STREET Address: Address: TAMPA, FL 33629 US City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition BARRETT, JAMES W Name: Name: 14317 SHEA DRIVE Address: Address:

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.

City-St-Zip:

SIGNATURE: JOHN M. PANDO PRES 03/24/2009