2007 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Oct 16, 2007
Secretary of State

DOCUMENT# P97000010463

Entity Name: ST. CLOUD INTERNATIONAL TILE, INC.

Current Principal Place of Business:

1318 MICHIGAN AVE
ST CLOUD, FL 34769

New Principal Place of Business:

Current Mailing Address:

1318 MICHIGAN AVE
ST CLOUD, FL 34769

New Mailing Address:

FEI Number: 59-3460010 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

QUARBERG, MARIA F
1318 MICHIGAN AVE
ST CLOUD, FL 34769 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: MARIA F. QUARBERG
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: PD ( ) Delete
Name: QUARBERG, MARIA F
Address: 1318 MICHIGAN AVE
City-St-Zip: ST CLOUD, FL 34769

Title: VP ( ) Delete
Name: CABRERA, TOMAS
Address: 1318 MICHIGAN AVE
City-St-Zip: SAINT CLOUD, FL 34769

Title: T ( ) Delete
Name: MADAN, ARGELIA S
Address: 1318 MICHIGAN AVENUE
City-St-Zip: ST. CLOUD, FL 34769

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change ( ) Addition
Name: RODENBECK, LAURIE
Address: 1318 MICHIGAN AVENUE
City-St-Zip: ST. CLOUD, FL 34769

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: MARIA F. QUARBERG PD 10/16/2007
Electronic Signature of Signing Officer or Director — Date