2005 FOR PROFIT CORPORATION ANNUAL REPORT

Jan 26, 2005 08:00 AM **DOCUMENT # P97000069597 Secretary of State** 1. Entity Name ROJÁS TILE, INC. Mailing Address Principal Place of Business 885 GRAND RAPIDS BLVD 885 GRAND RAPIDS BLVD NAPLES, FL 34120 NAPLES, FL 34120 01232005 No Cha-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FE! Number 59-3466699 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE ROJAS, ANTONIO 885 GRAND RAPIDS BLVD NAPLES, FL 34120 IN THIS SPACE 3. 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 famillar with, and accept the obligations of registered agent. Signature, typod or printed name of registery's agont and title it applicable, (NOTE, Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 \$5,00 May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. D TITLE NAME ROJAS, ANTONIO 885 GRAND RAPIDS BLVD STREET ADDRESS NAPLES, FL 34120 CITY-ST-7IP U00000198109 01/27/05-80033-020 150.00 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7IP 12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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 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 all other like empowered. SIGNATURE:

SIGNING OFFICER OR DIRECTOR

FILED

Daytime Phone #