

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 11, 2005 8:00 am**  
**Secretary of State**

04-11-2005 90141 008 \*\*\*150.00

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                    |                           |                                                                                                                                                                |                                                                                                                                         |  |
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| <b>DOCUMENT # P97000082114</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                    |                           |                                                                                                                                                                |                                                                                                                                         |  |
| <b>1. Entity Name</b><br>INTERNATIONAL TILE CORPORATION                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                    |                           |                                                                                                                                                                |                                                                                                                                         |  |
| <b>Principal Place of Business</b><br>3318 NW 79 AVE<br>UNIT 8A<br>MIAMI, FL 33122                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                    |                           | <b>Mailing Address</b><br>7800 NW 32ND ST.<br>MIAMI, FL 33122                                                                                                  |                                                                                                                                         |  |
| <b>2. Principal Place of Business</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                    | <b>3. Mailing Address</b> |                                                                                                                                                                |                                                                                                                                         |  |
| Suite, Apt. #, etc.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                    | Suite, Apt. #, etc.       |                                                                                                                                                                |                                                                                                                                         |  |
| City & State                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                    | City & State              |                                                                                                                                                                |                                                                                                                                         |  |
| Zip                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Country                                                                                            | Zip                       | Country                                                                                                                                                        | <b>4. FEI Number</b><br>65-0788022                                                                                                      |  |
| <b>5. Certificate of Status Desired</b> <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                    |                           |                                                                                                                                                                | <b>\$8.75 Additional Fee Required</b>                                                                                                   |  |
| <b>6. Name and Address of Current Registered Agent</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                    |                           | <b>7. Name and Address of New Registered Agent</b>                                                                                                             |                                                                                                                                         |  |
| ORTIZ, IVAN<br>7800 NW 32ND ST.<br>MIAMI, FL 33122                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                    |                           | Name <u>ROSEMARIE ORTIZ</u><br>Street Address (P.O. Box Number is Not Acceptable)<br><u>7800 NW 32 ST</u><br>City <u>MIAMI</u> <u>FL</u> Zip Code <u>33122</u> |                                                                                                                                         |  |
| <b>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.</b>                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                    |                           |                                                                                                                                                                |                                                                                                                                         |  |
| SIGNATURE <u>Rosemarie Ortiz</u><br><small>Signature, typed or printed name of registered agent and title if applicable.</small>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                    |                           | DATE <u>4-3-05</u>                                                                                                                                             |                                                                                                                                         |  |
| <b>FILE NOW!!! FEE IS \$150.00</b><br><b>After May 1, 2005 Fee will be \$550.00</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                    |                           | <b>9. Election Campaign Financing</b> <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>                                                              |                                                                                                                                         |  |
| <b>10. OFFICERS AND DIRECTORS</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                    |                           | <b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>                                                                                                   |                                                                                                                                         |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | PTD<br>ORTIZ, IVAN<br>7800 NW 32 ST.<br>MIAMI, FL 33183 <input checked="" type="checkbox"/> Delete |                           | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                 | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                       |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | VSD<br>ORTIZ, ROSEMARIE A<br>7800 NW 32 ST.<br>MIAMI, FL 331833149 <input type="checkbox"/> Delete |                           | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                 | PSD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition                                                        |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | VD<br>ORTIZ, CHRISTOPHER<br>7800 NW 32 ST.<br>MIAMI, FL 33122 <input type="checkbox"/> Delete      |                           | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                 | VM <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition                                                         |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <input type="checkbox"/> Delete                                                                    |                           | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                 | VTD<br>ORTIZ, IVAN V.<br>7800 NW 32 ST.<br>MIAMI, FL 33122 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <input type="checkbox"/> Delete                                                                    |                           | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                 | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                       |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <input type="checkbox"/> Delete                                                                    |                           | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                 | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                       |  |
| <b>12. I hereby certify that the information supplied with this filing 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.</b> |                                                                                                    |                           |                                                                                                                                                                |                                                                                                                                         |  |
| SIGNATURE: <u>Rosemarie Ortiz</u><br><small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                    |                           | DATE <u>4-3-05</u>                                                                                                                                             |                                                                                                                                         |  |