2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jan 18, 2005 08:00 AM Secretary of State

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DOCUMENT # P9900004939 1. Entity Name RIGO CABRERA TILE WAREHOUSE, INC.				Secretary of State				
Principal Place 4701 DISTR SUITE 2 ORLANDO, F	•		ailing Address 5462 HOFFNER DR. STE. #502 DRLANDO, FL 32812	n	<u> </u>		IN BANK BANK CIDIF FAN	IE (IIII (IIII) (II IIII)
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	, 					of Status Desired.		75 Additional Required
	6. Name and Add	iress of Current Regis	tered Agent					
CABRERA, RIGOBERTO 2926 SUMMER SWAN DR. ORLANDO, FL 32825						NOT W		
8. The above the obligation of	tions of registerud age	this statement for the part.	ourpose of changing lit register fapilicable. (PICTE Registers	ed office or register		oth, in the State of Fi	orida. I am famir.a	er with, and accept
FIL After M	E NOW!!! FEE !8 ay 1, 2005 Fee v	\$150.00 viil be \$550.00	Election Campaign Final Trust Fund Contribution.		00 May Be ad to Fees			
10.		OFFICERS AND DIREC	CTORS	1		<u> </u>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CABRERA, RIGO 2926 SUMMER SI ORLANDO, FL 32	BBRTO WAN DR.				A A A A A A A A A A A A A A A A A A A		.,,,
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TITLE NAME STREET ADDRESS CITY-ST-ZIP			***************************************					

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 empuwered 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:

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #