
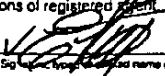



FILED
Aug 25, 2005 8:00 am
Secretary of State

06-30-2005 90001 032 ***150.00

2005 FOR PROFIT CORPORATION
ANNUAL REPORT

6/31

| | | | |
|---|--|--|--|
| DOCUMENT # P99000005440 | |  | |
| 1. Entity Name ELIX TILE, CORP. | | | |
| Principal Place of Business 7701 W 34TH CT. HIALEAH, FL 33018 | | Mailing Address 7701 W 34TH CT. HIALEAH, FL 33018 | |
| 2. Principal Place of Business 5594 Ramble Rose way Suite, Apt. #, etc. | | 3. Mailing Address 5594 Ramble Rose way Suite, Apt. #, etc. | |
| City & State West Palm Beach, FL | | City & State West Palm Beach, FL | |
| Zip 33415 | | Country USA | |
| 4. FEI Number 65-0896116 | | Applied For <input type="checkbox"/> Not Applicable | |
| 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required | | 06272005 Chg-P CR2E034 (10/03) | |
| 6. Name and Address of Current Registered Agent CESAR RUIZ, ELIX 7701 W 34TH CT. HIALEAH, FL 33018 | | 7. Name and Address of New Registered Agent Name CESAR RUIZ, ELIX Street Address (P.O. Box Number is Not Acceptable) 5594 Ramble Rose way City West Palm Beach FL Zip Code 33415 | |
| 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. SIGNATURE  Elix Ruiz Cesar DATE 6/27/05 <small>Signature of registered agent and title if applicable (NOTE: Registered Agent signature required when reappointing)</small> | | | |
| FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005 | | 9. Election Campaign Financing Trust Fund Contribution: <input type="checkbox"/> \$5.00 May Be Added to Fees In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. | |
| 10. OFFICERS AND DIRECTORS | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PD RUIZ, ELIX CESAR 7701 W 34TH CT. HIALEAH, FL 33018 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | PD RUIZ, ELIX CESAR 5594 Ramble Rose way West Palm Beach, FL 33415 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VSD RUIZ, SOCORRO 7701 W 34TH CT. HIALEAH, FL 33018 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | VSD RUIZ, SOCORRO 5594 Ramble Rose Way West Palm Beach, FL 33415 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D LESTERR, ALI RUIZ 7701 W 34TH CT. HIALEAH, FL 33018 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | D LESTERR, ALI RUIZ 5594 Ramble Rose Way West Palm Beach, FL 33415 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VT RUIZ, ERICK ALI 7701 W 34TH CT. HIALEAH, FL 33018 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | VT RUIZ, ERICK ALI 5594 Ramble Rose Way West Palm Beach, FL 33415 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 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 my address, with all other like empowered. | | | |
| SIGNATURE:  Elix Cesar Ruiz | | DATE 6/27/05 (780) 229-5798 | |

ATTACHMENT

66026435

Wednesday, August 17, 2005

To: Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

From: Elix Tile, Corp
5594 Ramble Rose Way
West Palm Beach, FL 33415

Re: **Document Number: P99000005440**

To Whom It May Concern:

By this letter I, Elix C. Ruiz, president of Elix Tile, Corp will like to request from you the reactivation of my corporation with the State of Florida. I did not registered on time last year because I moved to West Palm Beach and the registration notice was never received.

I apologized and kindly request a waiver of any penalties our corporation may be liable for. Please feel free to contact me if you may need any additional information in regards to this case.

Regards,



Elix C. Ruiz
President