

2005 FOR PROFIT CORPORATION ANNUAL REPORT

6/3

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

06-30-2005 90001 032 ***150.00

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	Zip 33415	Country USA
6. Name and Address of Current Registered Agent CESAR RUIZ, ELIX 7701 W 34TH CT. HIALEAH, FL 33018			
Name <u>Cesar Ruiz, Eliz</u> Street Address (P.O. Box Number is Not Acceptable) <u>5594 Ramble Rose Way</u> City <u>West Palm Beach</u> FL Zip Code <u>33415</u>			
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: <u>Elix Ruiz Cesar</u>		(NOTE: Registered Agent signature required when amending) DATE: <u>6/27/05</u>	
Signature, typed or printed name of registered agent and title if applicable			
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			
TITLE: PD NAME: RUIZ, ELIX CESAR STREET ADDRESS: 7701 W 34TH CT. CITY-ST-ZIP: HIALEAH, FL 33018		<input type="checkbox"/> Delete TITLE: PD NAME: Ruiz, Eliz Cesare STREET ADDRESS: 5594 Ramble Rose Way CITY-ST-ZIP: West Palm Beach, FL 33415	
TITLE: VSD NAME: RUIZ, SOCORRO STREET ADDRESS: 7701 W 34TH CT. CITY-ST-ZIP: HIALEAH, FL 33018		<input type="checkbox"/> Delete TITLE: VSD NAME: Ruiz, Socorro STREET ADDRESS: 5594 Ramble Rose Way CITY-ST-ZIP: West Palm Beach, FL 33415	
TITLE: D NAME: LESTERR, ALI RUIZ STREET ADDRESS: 7701 W 34TH CT CITY-ST-ZIP: HIALEAH, FL 33018		<input type="checkbox"/> Delete TITLE: D NAME: LESTERR, Ali Ruiz STREET ADDRESS: 5594 Ramble Rose Way CITY-ST-ZIP: West Palm Beach, FL 33415	
TITLE: VT NAME: RUIZ, ERICK ALI STREET ADDRESS: 7701 W 34TH CT. CITY-ST-ZIP: HIALEAH, FL 33018		<input type="checkbox"/> Delete TITLE: VT NAME: Ruiz, Erick Al STREET ADDRESS: 5594 Ramble Rose Way CITY-ST-ZIP: West Palm Beach, FL 33415	
TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:		<input type="checkbox"/> Delete TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	
TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:		<input type="checkbox"/> Delete TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition TITLE: PD NAME: Ruiz, Eliz Cesare STREET ADDRESS: 5594 Ramble Rose Way CITY-ST-ZIP: West Palm Beach, FL 33415			
<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition TITLE: VSD NAME: Ruiz, Socorro STREET ADDRESS: 5594 Ramble Rose Way CITY-ST-ZIP: West Palm Beach, FL 33415			
<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition TITLE: D NAME: LESTERR, Ali Ruiz STREET ADDRESS: 5594 Ramble Rose Way CITY-ST-ZIP: West Palm Beach, FL 33415			
<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition TITLE: VT NAME: Ruiz, Erick Al STREET ADDRESS: 5594 Ramble Rose Way CITY-ST-ZIP: West Palm Beach, FL 33415			
<input type="checkbox"/> Change <input type="checkbox"/> Addition TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:			
<input type="checkbox"/> Change <input type="checkbox"/> Addition TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:			
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: <u>Elix Cesar Ruiz</u>		6/27/05 680-229-5798 Daytime Phone #	
SIGNED, TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			

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

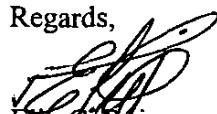
Re: Document Number: P99000005440

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