

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V22027

Entity Name: THE TILE PLACE CORP.

FILED
Sep 08, 2005
Secretary of State

Current Principal Place of Business:

19300 N.W. 48TH CT.
MIAMI, FL 33055

New Principal Place of Business:

15480 N.W. 27 AVE.
MIAMI, FL 33054

Current Mailing Address:

19300 N.W. 48TH CT.
MIAMI, FL 33055 US

New Mailing Address:

19330 N.W. 48TH CT.
MIAMI, FL 33055 US

FEI Number: 65-0318931

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

NICOT, ELIAS
19300 N.W. 48TH CT.
MIAMI, FL 33055 US

Name and Address of New Registered Agent:

NICOT, ELIAS
19330 N.W. 48TH CT.
MIAMI, FL 33055 US

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.

SIGNATURE: ELIAS NICOT

09/08/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: NICOT, ELIAS
Address: 19300 NW 48TH CT.
City-St-Zip: MIAMI, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: NICOT, ELIAS
Address: 19330 NW 48TH CT.
City-St-Zip: MIAMI, FL 33055

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ELIAS NICOT

PRES

09/08/2005

Electronic Signature of Signing Officer or Director

Date