

# **2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P02000110609

Entity Name: R.A.C. TILE & MARBLE, INC.

**FILED**  
**May 18, 2008**  
**Secretary of State**

**Current Principal Place of Business:**

10267 SLEEPY BROOK WAY  
BOCA RATON, FL 33428 US

**New Principal Place of Business:**

**Current Mailing Address:**

10267 SLEEPY BROOK WAY  
BOCA RATON, FL 33428 US

**New Mailing Address:**

FEI Number: 81-0574319

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

COSTA, REGINALDO A  
10267 SLEEPY BROOK WAY  
BOCA RATON, FL 33428 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P, D ( ) Delete  
Name: COSTA, REGINALDO A  
Address: 10267 SLEEPY BROOK WAY  
City-St-Zip: BOCA RATON, FL 33428 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: 10% ( ) Change (X) Addition  
Name: ANDRADE, CHIRLEI S  
Address: 10267 SLEEPY BROOK WAY  
City-St-Zip: BOCA RATON, FL 33428 US

Title: 10% ( ) Change (X) Addition  
Name: SOUZA, WELITON F  
Address: 5911 NW 59 AVE  
City-St-Zip: PARKLAND, FL 33067 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: REGINALDO ANDRADE COSTA

P,D

05/18/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date