

**FILED**  
**Aug 24, 2005 8:00 am**  
**Secretary of State**

08-24-2005 90055 018 \*\*\*150.00

**2005 FOR PROFIT CORPORATION ANNUAL REPORT**

**50063133**



DOCUMENT # P04000017632			
1. Entity Name DAVID JASKOWIAK TILE, INC.			
Principal Place of Business 408 CARMINE DR. COCOA BCH, FL 32931		Mailing Address 408 CARMINE DR. COCOA BCH, FL 32931	
2. Principal Place of Business <i>6070 Irlo Bronson Apt B</i>		3. Mailing Address <i>same</i>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State <i>St. Cloud Florida</i>		City & State	
Zip <i>34771</i>	Country <i>U.S.A.</i>	Zip	Country
4. FEI Number <i>20-0901162</i>		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75* Additional Fee Required	
6. Name and Address of Current Registered Agent JASKOWIAK, DAVID 408 CARMINE DR. COCOA BCH, FL 32931		7. Name and Address of New Registered Agent Name <i>David Jaskowiak</i> Street Address (P.O. Box Number is Not Acceptable) <i>6070 Irlo Bronson Apt B</i> City <i>St. Cloud</i> FL Zip Code <i>34771</i>	
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 <i>David Jaskowiak</i>		DATE <i>8-20-05</i>	
Signature (Typed or printed name of registered agent and title if applicable)		(NOTE: Registered Agent signature required when reinstating)	
FILE NOW!!! FEE IS \$550.00 Due by September 7, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JASKOWIAK, DAVID 408 CARMINE DR. COCOA BCH, FL 32931 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <i>6070 Irlo Bronson Apt B St. Cloud FL 34771</i>
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
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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 an address, with all other like empowered.			
SIGNATURE: <i>David Jaskowiak</i>		Date <i>8-20-05</i> Daytime Phone # <i>407-467-5095</i>	
Signature and Typed or Printed Name of Signing Officer or Director		Date	

ATTACHMENT

PO 4000017632

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50063133

August 5, 2005

Division of Corporations  
Annual Reports Section  
P.O. Box 1500  
Tallahassee, FL 32302-1500

To Whom It May Concern:

Please find enclosed our company's check for \$150.00 to cover the annual corporation fee for 2005.

The reason for the late filing is that we didn't receive the first postcard. This is also the first report we have filed.

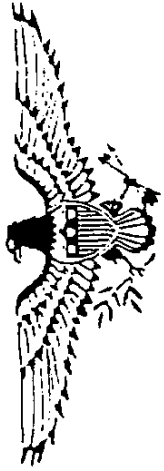
Based on the above reason, we ask for the penalties to be waived.

Thank you for your consideration.

David Jaskowiak Tile & Inc.

ATTACHMENT

50063/33



Organized under the laws of the state of Florida

David Jaskowick Tile Inc.  
Corporate Name

This Certifies that David Jaskowick is the holder of

500 Shares of the 500 shares of the total stock  
# Shares Owned Total # Shares Issued

issued by the above named Corporation.

This evidences 100 % of the total shares of stock issued by the corporation.

In Witness Whereof, the said Corporation has caused this Certificate to be signed by the July authorized officer this 8<sup>th</sup> day of August A.D. 2005

David Jaskowick  
Signature of an officer of the Corporation

ATTACHMENT

PD40000011682  
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IN WITNESS WHEREOF, the undersigned subscriber has executed these articles of incorporation this 12th day of January 2004.

  
Subscriber

**CERTIFICATE DESIGNATING PLACE OF BUSINESS OR COMICILE FOR THE SERVICE OF PROCESS WITHIN THIS STATE, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED.**

In pursuance of Chapter 48.091 Florida Statutes, the following is submitted in compliance with said Act; First - That DAVID JASKOWIAK TILE, INC. desiring to organize under the laws of the State of Florida, with its principal office, as indicated in the articles of incorporation in the County of BREVARD, City of COCOA BEACH, FL 32931, State of Florida has named DAVID JASKOWIAK, located at 408 CARMINE DRIVE, as its agent to accept service of process within this state.

**ACKNOWLEDGEMENT**

Having been named to accept service of process for the above stated Corporation at the place designated in the Certificate, I hereby agree to act in this capacity and to comply with provisions of said Act relative to keeping open said office.

  
(Register Agent)