

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 27, 2007 8:00 am**  
**Secretary of State**

04-27-2007 90230 028 \*\*\*150.00

**DOCUMENT # P05000007165**

1. Entity Name  
DBJ TILE, INC.



Principal Place of Business  
5708 10TH STREET EAST  
BRADENTON, FL 34203 US

Mailing Address  
5708 10TH STREET EAST  
BRADENTON, FL 34203 US

60043273



04172007 Chg-P CR2E034 (12/06)

2. Principal Place of Business - No P.O. Box #  
5539 16TH ST W  
Suite, Apt. #, etc.

3. Mailing Address  
5539 16TH ST W  
Suite, Apt. #, etc.

City & State  
BRADENTON, FL

City & State  
BRADENTON, FL

4. FEI Number  
20-2155648

Applied For  
Not Applicable

Zip  
34207

Country  
MANATEE

Zip  
34207

Country  
U.S.

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

## 6. Name and Address of Current Registered Agent

JAIME, EDUARDO  
5708 10TH ST EW  
BRADENTON, FL 34203

## 7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City BRADENTON

FL

Zip Code 34207

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.

EDUARDO JAIME

/ /07

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

## 10. OFFICERS AND DIRECTORS

TITLE  
NAME PSTD  
STREET ADDRESS JAIME, EDUARDO  
CITY - ST - ZIP 5708 10TH STREET EAST  
BRADENTON, FL 34203 ☐ Delete

TITLE  
NAME ☐ Delete  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME ☐ Delete  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME ☐ Delete  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME ☐ Delete  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME ☐ Delete  
STREET ADDRESS  
CITY - ST - ZIP

## 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME ☐ Change ☐ Addition  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME ☐ Change ☐ Addition  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME ☐ Change ☐ Addition  
STREET ADDRESS  
CITY - ST - ZIP

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NAME ☐ Change ☐ Addition  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME ☐ Change ☐ Addition  
STREET ADDRESS  
CITY - ST - ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

EDUARDO JAIME

SIGNATURE: *Eduardo Jaime* PRES  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

/ /07 941-526-2259  
Date Daytime Phone #