

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Apr 23, 2008 08:00 AM  
Secretary of State

DOCUMENT # P98000090862

1. Entity Name  
MIOTTO 2000 TILE & MARBLE WORKS, INC.



Principal Place of Business  
926 26TH STREET  
WEST PALM BEACH, FL 33407

Mailing Address  
926 26TH STREET  
WEST PALM BEACH, FL 33407



04142008 No Chg-P CR2E034 (11/05)

4. FEI Number  
65-0879406

Applied For  
Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

PETERS, RUTH  
926 2TH STREET  
WEST PALM BEACH, FL 33407

DO NOT WRITE  
IN THIS SPACE

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

FILE NOW!!! FEE IS \$150.00  
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing  
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D  
NAME PETERS, RUTH  
STREET ADDRESS 926 26TH STREET  
CITY-ST-ZIP WEST PALM BEACH, FL 33407

TITLE D  
NAME ZOLLO, CHRISTOPHER L  
STREET ADDRESS 926 26TH STREET  
CITY-ST-ZIP WEST PALM BEACH, FL 33407

TITLE D  
NAME ANDERSON, DAVID T  
STREET ADDRESS 926 26TH STREET  
CITY-ST-ZIP WEST PALM BEACH, FL 33407

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

000000916068  
05/12/08-80013-010 150.00

DO NOT WRITE  
IN THIS SPACE

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.

SIGNATURE: Ruth Peters RUTH PETERS, PRESIDENT 4-21-08 561-832-8511

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #