

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P99000081325

FILED
Jan 28, 2002 8:00 AM
Secretary of State

Entity Name: CREATIONS WITH TILE, INC.

Current Principal Place of Business:

11540 SE 129TH PL
OCKLAWAHA, FL 32179

New Principal Place of Business:

Current Mailing Address:

11540 SE 129TH PL
OCKLAWAHA, FL 32179

New Mailing Address:

FEI Number: 59-3604732

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RALSTON, JAMES R
9780 S.E. HWY. 464C
OCKLAWAHA, FL 32179

Name and Address of New Registered Agent:

RALSTON, JAMES R
11540 S.E. 129TH PL
OCKLAWAHA, FL 32179

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:

01/28/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: RALSTON, JAMES R
Address: 11540 SE 129TH PL
City-St-Zip: OCKLAWAHA, FL 32179

Title: S () Delete
Name: RALSTON, MICHELLE R
Address: 11540 SE 129TH PL
City-St-Zip: OCKLAWAHA, FL 32179

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VP () Change (X) Addition
Name: JASON, RALSTON M V
Address: 11565 S.E. HWY C25 AP#108
City-St-Zip: OCKLAWAHA, FL 32179 US

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: JAMES RALSTON

PD

01/28/2002

Electronic Signature of Signing Officer or Director

Date