

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**

**Apr 13, 2005 08:00 AM**  
**Secretary of State**

**DOCUMENT # 262945**

1. Entity Name

GIRONE TILE AND FLOORS, INC.



Principal Place of Business

1302 E BUSCH BLVD  
TAMPA FL 33612

Mailing Address

1302 E BUSCH BLVD  
TAMPA FL 33612

2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

City & State

Zip

Country

1st MOORE

CR2E034 (10/04)

4. FEI Number

59-0977083

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

STEAD, GERALD H.  
12421 N.FLORIDA AVE., STE.B-133  
TAMPA FL 33612

7. Name and Address of New Registered Agent

Name

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

City

**FL**

Zip Code

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

*Louis P. Caltagirone*  
Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

*4/11/05*  
DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2005 Fee Will Be \$550.00**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution ☐

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

10. OFFICERS AND DIRECTORS

TITLE ☐ Delete

NAME  
CALTAGIRONE, JENNIE  
STREET ADDRESS  
1302 E. BUSCH BLVD  
CITY ST ZIP  
TAMPA FL

TITLE ☐ Delete

NAME  
CALTAGIRONE, MICHAEL  
STREET ADDRESS  
1302 E BUSH BLVD.  
CITY ST ZIP  
TAMPA FL

TITLE ☐ Delete

NAME  
CALTAGIRONE, LOUIS  
STREET ADDRESS  
1302 E. BUSCH BLVD  
CITY ST ZIP  
TAMPA FL

TITLE ☐ Delete

NAME  
CALTAGIRONE, PHILIP P.  
STREET ADDRESS  
1302 E. BUSCH BLVD  
CITY ST ZIP  
TAMPA FL

TITLE ☐ Delete

NAME  
STREET ADDRESS  
CITY ST ZIP

TITLE ☐ Delete

NAME  
STREET ADDRESS  
CITY ST ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY ST ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY ST ZIP

U000000300765  
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☐ Change ☐ Addition

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☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY ST ZIP

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:**

*Louis P. Caltagirone*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*4/11/05*  
Date

Daytime Phone #