

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 12, 2004 8:00 am
Secretary of State

04-12-2004 90643 030 ***158.75

DOCUMENT # 450809

1. Entity Name

SIKES TILE DISTRIBUTORS, INC.



Principal Place of Business

3498 N. E. 12TH AVE.
POST OFFICE BOX 23038
OAKLAND PARK FL 33307

Mailing Address

3498 N. E. 12TH AVE.
POST OFFICE BOX 23038
OAKLAND PARK FL 33307

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1534762

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SIKES, JR., LEON R
3484 N.E. 12TH AVENUE
OAKLAND PARK FL 33307

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

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, 2004 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 V ☒ Delete
NAME TRAMONTANA, THOMAS
STREET ADDRESS 3498 N.E. 12TH AVE.
CITY-ST-ZIP OAKLAND PARK FL

TITLE P ☐ Delete
NAME SIKES, LEON R., III
STREET ADDRESS 3498 NE 12TH AVENUE
CITY-ST-ZIP OAKLAND PARK FL 33334

TITLE T ☐ Delete
NAME MICHALOSKI, PAUL
STREET ADDRESS 3498 N.E. 12TH PARK
CITY-ST-ZIP OAKLAND PARK FL

TITLE VP ☒ Delete
NAME MITCHELL, CHARLES
STREET ADDRESS 425 AVON ROAD
CITY-ST-ZIP WEST PALM BEACH 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

TITLE VICE-PRESIDENT ☐ Change ☒ Addition
NAME GLENDA BRANNON
STREET ADDRESS 3498 N.E. 12TH AVE
CITY-ST-ZIP OAKLAND PARK, FL.

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

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

TITLE VICE-PRESIDENT ☐ Change ☒ Addition
NAME KEN SMITH
STREET ADDRESS 3498 N.E. 12TH AVENUE
CITY-ST-ZIP OAKLAND PARK, FL.

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

TITLE ☐ Change ☐ Addition
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PAUL J. MICHALOSKI

03/15/04

Date

954-561-2446

Daytime Phone #