

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 692164

**FILED
Jan 14, 2009
Secretary of State**

Entity Name: ROMANELLI TILE, INC.

Current Principal Place of Business:

1818-7TH AVE NORTH
LAKEWORTH, FL 33461 US

New Principal Place of Business:

1818-7TH AVE NORTH
LAKE WORTH, FL 33461 US

Current Mailing Address:

1818-7TH AVE NORTH
LAKEWORTH, FL 33461 US

New Mailing Address:

1818-7TH AVE NORTH
LAKE WORTH, FL 33461 US

FEI Number: 59-2103006 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROMANELLI, ROCCO
1818 7TH AVE NORTH
LAKE WORKTH, FL 33461 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ROMANELLI, ROCCO
Address: 1818 7TH AVE. NORTH
City-St-Zip: LAKE WORTH, FL 33461

Title: S () Delete
Name: ROMANELLI, MARIA
Address: 1818 7TH AVE. NORTH
City-St-Zip: LAKE WORTH, FL 33461

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: ROCCO ROMANELLI

P

01/14/2009

Electronic Signature of Signing Officer or Director

_____ Date