

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J93402

FILED
Apr 08, 2009
Secretary of State

Entity Name: STEVE'S CERAMIC TILE, INC.

Current Principal Place of Business:

1520 S.E. PINWHEEL DRIVE
CRYSTAL RIVER, FL 34429

New Principal Place of Business:

1520 S.E. PINWHEEL DRIVE
CRYSTAL RIVER, FL 34428

Current Mailing Address:

9864 W HAWTHORNE STREET
CRYSTAL RIVER, FL 34428

New Mailing Address:

11404 W INDIAN WOODS PATH
CRYSTAL RIVER, FL 34428

FEI Number: 65-0003780

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MASSAGEE, STEVEN K JR
9864 W HAWTHORNE STREE
CRYSTAL RIVER, FL 34428 US

Name and Address of New Registered Agent:

MASSAGEE, STEVEN K JR
11404 W INDIAN WOODS PATH
CRYSTAL RIVER, FL 34428 US

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:

04/08/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MASSAGEE, STEVEN
Address: 1520 S.E. PINWHEEL DRIVE
City-St-Zip: CRYSTAL RIVER, FL 34429

Title: D () Delete
Name: MASSAGEE, BONNIE
Address: 1520 S.E. PINWHEEL DRIVE
City-St-Zip: CRYSTAL RIVER, FL 34429

Title: O () Delete
Name: MASSAGEE, STEVE K JR.
Address: 9864 W HAWTHORNE STREET
City-St-Zip: CRYSTAL RIVER, FL 34428

Title: S () Delete
Name: MASSAGEE, KRYSTAL K
Address: 9864 W HAWTHORNE STREET
City-St-Zip: CRYSTAL RIVER, FL 34428

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: MASSAGEE, STEVEN
Address: 1520 S.E. PINWHEEL DRIVE
City-St-Zip: CRYSTAL RIVER, FL 34428

Title: D (X) Change () Addition
Name: MASSAGEE, BONNIE
Address: 1520 S.E. PINWHEEL DRIVE
City-St-Zip: CRYSTAL RIVER, FL 34428

Title: O (X) Change () Addition
Name: MASSAGEE, STEVE K JR.
Address: 11404 W INDIAN WOODS PATH
City-St-Zip: CRYSTAL RIVER, FL 34428

Title: S (X) Change () Addition
Name: MASSAGEE, KRYSTAL K
Address: 11404 W INDIAN WOODS PATH
City-St-Zip: CRYSTAL RIVER, FL 34428

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: KRYSTAL K MASSAGEE

S

04/08/2009

Electronic Signature of Signing Officer or Director

Date