

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L55187

FILED
Jun 25, 2003
Secretary of State

Entity Name: P.C. & S. TILE, INC.

Current Principal Place of Business:

816 11TH DRIVE SW
VERO BEACH, FL 32962 US

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 6519
VERO BEACH, FL 32961 US

New Mailing Address:

FEI Number: 65-0179399

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STRUVE, PAUL C.
1010 SEAWAY DRIVE APT. A
FORT PIERCE, FL 34949

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: PD () Delete
Name: STRUVE, PAUL C.,
Address: 1010 SEAWAY DRIVE APT. A
City-St-Zip: FORT PIERCE, FL 34949

Title: S () Delete
Name: GAY, LAURA
Address: PO BOX 3654
City-St-Zip: FORT PIERCE, FL 34954

Title: V () Delete
Name: DANIEL LEE COOPER,
Address: 8535 24TH ST
City-St-Zip: VERO BEACH, FL 32966

Title: T () Delete
Name: GAY, LAURA
Address: 1465 6TH STREET
City-St-Zip: VERO BEACH, FL 32962

Title: T (X) Delete
Name: BARTHOLOMEW, MONICA
Address: 2015 36TH AVE.
City-St-Zip: VERO BEACH, FL 32960

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: S (X) Change () Addition
Name: STRUVE, MIKI J
Address: 11576 INDIAN RIVER DRIVE
City-St-Zip: SEBASTIAN, FL 34958

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

Title: T (X) Change () Addition
Name: COOPER, GRANT
Address: 715 20TH STREET
City-St-Zip: VERO BEACH, FL 32960

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

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: MIKI STRUVE

S

06/25/2003

Electronic Signature of Signing Officer or Director

Date