

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 05, 2006 8:00 am
Secretary of State

04-05-2006 90149 023 ***150.00

DOCUMENT # M58931

1. Entity Name
TONY MASSA TILE AND MARBLE, INC.



Principal Place of Business
**106 NE 9TH ST
DELRAY BEACH, FL 33444 US**

Mailing Address
**P.O. BOX 2938
APT. 9
DELRAY BEACH, FL 33483 US**



03132006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0033691

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**MASSA, LISA
106 NE 9TH ST
DELRAY BEACH, FL 33444**

**DO NOT WRITE
IN THIS SPACE**

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, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PT
MASSA, ANTONIO
106 NE 9TH ST
DELRAY BEACH, FL**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VS
MASSA, LISA
106 NE 9TH ST
DELRAY BEACH, FL**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

Antonio Massa
Antonio Massa

Pres./Treas

3/21/06 561-278-3803

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

ATTACHMENT
40044454 3/31/06
M58931

Please make note of our
new mailing address.

Our local post office location
has been shut down, and we
are now receiving all of our mail
at our principal place of business.

If you could please make note
of this change it would be
greatly appreciated.

Thank you,

Sincerely,

Antonio Ossa

New Mailing Address:

106 N.E. 9th. St. Unit #2

Delray Beach, FL. 33444-4040