## **2008 FOR PROFIT CORPORATION ANNUAL REPORT**

## Apr 03, 2008 8:00 am Secretary of State DOCUMENT # P00000055966 04-03-2008 90068 001 \*\*\*450.00 1. Entity Name BAY TILE & CARPET, INC. Principal Place of Business Mailing Address 2481 MCMULLEN BOOTH ROAD UNIT B 2481 MCMULLEN BOOTH ROAD UNIT B 66005768 CLEARWATER, FL 33759 CLEARWATER, FL 33759 dis. 02202008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3650758 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DOUKLIAS, GEORGE DO NOT WRITE 2481 MCMULLEN BOOTH ROAD UNIT B CLEARWATER, FL 33759 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS TITLE NAME DOUKLIAS, GEORGE STREET ADDRESS 2481 MCMULLEN BOOTH ROAD UNIT B CITY-ST-ZIP CLEARWATER, FL 33759 TITLE NAME STREET ADDRESS CITY ST 7IP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this flip 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 a SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**FILED** 

Daytime Phone #