2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jul 14, 2004 08:00 AM Secretary of State

				_ Secretary of State
DOCUMENT # P0000094726 1. Entity Name ESG TILES & MARBLE EXPERT, INC.				
Principal Place of Business Mailing Address				
3394 WEST 74 STREET P.O. BO		P.O. BOX 126367 HIALEAH, FL 33012	-	A SERVICE OF RESIDENCE OF RESIDENCE SERVICES AND A SERVICE SERVICES OF SERVICES AND ASSESSED AS A SERVICE OF SERVICES AS
				07122004 No Chg-P CR2E034 (10/03)
DO NOT WRITE IN THIS SPAC			CE	4. FEI Number Applied For 65-1048281 Not Applied by
· · ·				5. Certificate of Status Desired S8.75 Additional Fee Required
6. Name and Address of Current Registered Agent				
GONZALEZ, SARA 3394 W 74TH ST HIALEAH, FL 33018				DO NOT WRITE IN THIS SPACE
B. 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 It applicable (NOTE Régistered Agent signature required when reinstating) Option				
	Signature, typed or printed name of registered agent an	I Tille if appricable (NOTE, Hegisteri	eg Agent signature reduxe	ed when reinstaling) Optit
FILE NOW!!! FEE IS \$150.00 Due by September 8, 2004 9. Election Campaign Finan Trust Fund Contribution.				5.00 May Be In accordance with s. 607,193(2)(b), F.S., the corporation did not receive the prior notice.
10.	OFFICERS AND D	RECTORS		
THLE NAME STREET ADDRESS C:TY-SI-Z:P	PD GONZALEZ, SARA 3394 W 74 ST. HIALEAH, FL 33018			100000166057
TITLE NAME STREET ADDRESS				07/14/04-80001-015 150.00
CITY-ST-ZIP ETLE NAME STREET ADDRESS			- I and taraha.	
CITY-ST-7IP		<u>.</u>	- 147 (1.1.1.174)	DO NOT WRITE
NAME STREET ADDRESS CITY-ST-2IP				IN IHIS SPACE
THUE NAME STREET ADDRESS				
CITY-SI-ZIP				
NAME STREFT ADDRESS CITY-ST-ZIP				
12. I hereby indicated of the co-	certify that the information supplied with I on this report or supplemental report portation of the receiver or fusieee empor or on an attachment with an address, w	his filing does not qualify for the ex rue and accurate and that my sign vered to execute this feport as requ ith all ether like employered.	emption stated in Sature shall have the uired by Chapter 60	Section 119.07(3)(i), Florida Statutes. I further certify that the information the same legal effect as if made under cath, that I am an officer or director 307, Florida Statutes, and that my name appears in Block 10 or Block 11 in the same appears.