


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2006 8:00 am
Secretary of State

05-04-2006 90195 035 ***150.00

DOCUMENT # P01000020545	
1. Entity Name BREVARD TILE AND MARBLE INC.	

Principal Place of Business 6433 FLONA VISTA COCOA, FL 32997 US	Mailing Address 6433 FLONA VISTA 1800 W. 49 STREET, #201 COCOA, FL 32997 US
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2. Principal Place of Business 6433 FLORA VISTA PL.	3. Mailing Address 6433 FLORA VISTA PL.
Suite, Apt. #, etc.	Suite, Apt. #, etc.

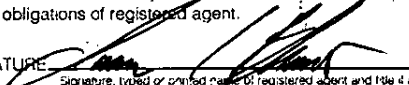
City & State Cocoa, FL.	City & State Cocoa, FL.
Zip 32997	Country USA
Zip 32997	Country USA

04062006 Chg-P CR2E034 (11/05)

4. FEI Number 59-3700190	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent BLANCO, JUAN C 6433 FLONA VISTA COCOA, FL 32997	
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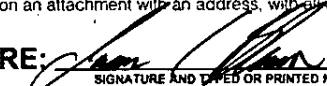
7. Name and Address of New Registered Agent	
Name Blanco, Juan C	
Street Address (P.O. Box Number is Not Acceptable) 6433 FLORA VISTA PLACE	
City Cocoa,	FL Zip Code 32997

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 	JUAN C. BLANCO DATE 4-6-06

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BLANCO, JUAN C 480 BYRON ST. COCOA, FL 32927 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD ARAMBULA, JESUS ADRIAN 610 LINDSAY AVE. COCOA, FL 32927 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD ARANDA, HECTOR 1514 CLEAR LAKE RD. COCOA, FL 32922 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Blanco, Juan C. 6433 FLORA VISTA PLACE Cocoa, FL 32997 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: 	JUAN C. BLANCO, Pres. 4-4-06 321-631-3409