

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P01000043216

FILED
May 09, 2008
Secretary of State**Entity Name:** TRI-SURFACE COUNTERTOPS, INC.**Current Principal Place of Business:**11641 US HIGHWAY 19 N
CLEARWATER, FL 33764**New Principal Place of Business:****Current Mailing Address:**11641 US HIGHWAY 19 N
CLEARWATER, FL 33764**New Mailing Address:**2500 NE COACHMAN RD
CLEARWATER, FL 33765**FEI Number:** 59-3716705**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**RUGO, RALPH
11641 US HWY 19 NORTH
CLEARWATER, FL 33764 US**Name and Address of New Registered Agent:**ARCIERI, FRANCESCO
2500 NE COACHMAN RD
CLEARWATER, FL 33765 US

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: FRANCESCO ARCIERI

05/09/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** D () Delete
Name: RUGO, RALPH
Address: 11641 US HWY 19 NORTH
City-St-Zip: CLEARWATER, FL 33764**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** TS (X) Change () Addition
Name: ARCIERI, FRANCESCO
Address: 2500 NE COACHMAN RD
City-St-Zip: CLEARWATER, FL 33765

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: FRANCESCO ARCIERI

TS

05/09/2008

Electronic Signature of Signing Officer or Director

Date