## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # P01000050683

EXCLUSIVE TILE AND STONE INC.

**FILED** Apr 12, 2006 08:00 AM Secretary of State

Principal Place of Business

2825 BUSINESS CENTER BOULEVARD WICKMAM BUSINESS PARK, STE. C-3 MELBOURNE,, FL 32940

Mailing Address

2825 BUSINESS CENTER BOULEVARD WICKMAM BUSINESS PARK, STE. C-3 MELBOURNE, FL 32940



## DO NOT WRITE IN THIS SPACE

CR2E034 (11/05) 01042006 No Chg-P

Applied For 4. FEI Number 59-3739705 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LIMONTA, ARTURO 2825 BUSINESS CENTER BLVD SUITE C3 MELBOURNE, FL 32940

SIGNATURE:

## DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the pations of registered agent	ourpose of changing its registered office or	registered agent, or both	n, in the State of Florida. I am familiar with	, and accept
SIGNATURE.					_
	Signature, typed or printed name of registered egent and life	f eppicable (NOTE Registered Agent agnatur	e required when remstelmg)	DATE	
FILE NOWIN FEE 18 \$150.00 After May 1, 2006 Fee will be \$550.00		Election Campaign Financing     Trust Fund Contribution.	\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIREC	CTORS			
TITUE NAME STREET ADDRESS CATY-ST-ZIP	P LIMONTA, ARTURO 2825 BUSINESS CENTER BOULEVAI MELBOURNE., FL 32940			000000504983 04/26/06-80093-001	150.00
TITLE NAME STREET ADDRESS CYTY-ST-ZIP	VP LIMONTA, AMY LYNN 2825 BUSINESS CENTER BOULEVAI MELBOURNE,, FL 32940	RD		. ED.	
TITLE NAME STRLET ADDRESS CITY-ST-ZIP			DO	NOT WRITE	
TITLE HAME STREET ADDRESS GITY-ST-ZIP			IN T	HIS SPACE	
TITLE NAME STREET ADDRESS CHY-ST-ZIP					į
STREET ADDRESS C:TY+SI-ZIP				·	

12. Thereby 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 accurate 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 arthress, with all other like empowered.

SIGNATURE:

ALTILLO LIMULTA

+/6/66

321) 751-470 b

ARTURO LIMUNTA