2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000064196

Entity Name: GALLERIA TILE AND MARBLE, INC.

FILED Jun 05, 2<u>00</u>9 Secretary of State

Current Principa	al Place of Business:	New Principal Place of Business:

1200 SW THOMAS CT. 10120 BOCA ENTRADA BLVD. PORT ST. LUCIE, FL 34953

#109

BOCA RATON, FL 33428

Current Mailing Address: New Mailing Address:

1200 SW THOMAS CT. 10120 BOCA ENTRADA BLVD.

PORT ST. LUCIE, FL 34953 #109

BOCA RATON, FL 33428

FEI Number: 59-2806307 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

PHARO, MICHAEL J PHARO, MICHAEL J

1200 SW THOMAS CT. 10120 BOCA ENTRADA BLVD. PORT ST. LUCIE, FL 34953 US

BOCA RATON, FL 33428 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: 06/05/2009

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

PHARO, MICHAEL J PHARO, MICHAEL J Name: Name:

1200 SW THOMAS CT. 10120 BOCA ENTRADA BLVD., #109 Address: Address:

City-St-Zip: PORT ST. LUCIE, FL 34953 City-St-Zip: BOCA RATON, FL 33428

Title: VΡ Title: VΡ (X) Change () Addition () Delete

Name: PHARO, KEITH C Name: PHARO, KEITH C

1200 SW THOMAS CT. 10120 BOCA ENTRADA BLVD., #109 Address: Address:

PORT ST. LUCIE, FL 34953 BOCA RATON, FL 33428 City-St-Zip: City-St-Zip:

Title: (X) Change () Addition Title: () Delete PHARO, DEVON Name: PHARO, DEVON Name:

10120 BOCA ENTRADA BLVD., #109 1200 SW THOMAS CT. Address Address:

City-St-Zip: PORT ST. LUCIE, FL 34953 City-St-Zip: BOCA RATON, FL 33428

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.

Ρ SIGNATURE: MICHAEL PHARO 06/05/2009