


2004 FOR PROFIT CORPORATION,  
ANNUAL REPORT

**FILED**  
**Feb 11, 2004 08:00 AM**  
**Secretary of State**

DOCUMENT # P01000122440 1. Entity Name CERAMIC INSTALLATION SUPPLY COMPANY, INC.	
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Principal Place of Business 5741 DEWEY ST HOLLYWOOD, FL 33023	Mailing Address 5741 DEWEY ST HOLLYWOOD, FL 33023
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**DO NOT WRITE IN THIS SPACE**

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01222004 No Chg-P CR2E034 (10/03)

4. FEI Number 02-0538802	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

LERNER, LARRY  
5741 DEWEY ST  
HOLLYWOOD, FL 33023

**DO NOT WRITE IN THIS SPACE**

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U00000046388 02/11/04-80100-018 150.00
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P COUTURE, STEVEN 3406 DEAN STT NAPLESOOD, FL 34104
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V LERNER, LARRY 9999 COLLINS AVE BAL HARBOUR, FL 33154
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LERNER, MARC 1281 100 ST BAY HARBOR, FL 33154
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Larry Lerner Date: 2/6/04 Daytime Phone #: 9549628666  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR