


**2004 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 23, 2004 08:00 AM**  
**Secretary of State**

**DOCUMENT # P02000031204**

1. Entity Name  
**ATLANTIS TILE & MARBLE SALES, INC.**



Principal Place of Business      Mailing Address

1770 W. 79TH ST.      1770 W. 79TH ST.  
 HIALEAH, FL 33014      HIALEAH, FL 33014

**DO NOT WRITE IN THIS SPACE**



04142004    No Chg-P    CR2E034 (10/03)

4. FEI Number 01-0705660	Applied For Not Applicable
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5. Certificate of Status Desired        **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

CUBAS, MIGUEL  
 1770 W. 79TH ST.  
 HIALEAH, FL 33014

**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.        **\$5.00** May Be Added to Fees

000000126518  
 04/23/04-80036-019 150.00

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	CUBAS, MIGUEL
STREET ADDRESS	1770 W. 79TH ST.
CITY - ST - ZIP	HIALEAH, FL 33014
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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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:** Cubas Miguel Cubas      4/14/04      786-255-6886  
Signature and typed or printed name of signing officer or director      Date      Daytime Phone #