

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000035309

FILED
Apr 21, 2009
Secretary of State

Entity Name: ITALIAN TILE & MARBLE DIST. OF COCONUT CREEK, INC.

Current Principal Place of Business:

125 N CONGRESS AVE
1 & 2
DELRAY BEACH, FL 33445

New Principal Place of Business:

125 N CONGRESS AVE
1 & 2
DELRAY BEACH, FL 33444

Current Mailing Address:

125 N CONGRESS AVE
1 & 2
DELRAY BEACH, FL 33445

New Mailing Address:

125 N CONGRESS AVE
1 & 2
DELRAY BEACH, FL 33444

FEI Number: 04-3634744

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPADAVECCHIA, JOHN JR.
5450 W. HILLSBORO BLVD. ST 1
COCONUT CREEK, FL 33073 US

Name and Address of New Registered Agent:

SPADAVECCHIA, JOHN JR.
125 NO CONGRESS AVE
1 & 2
DELRAY BEACH, FL 33344 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:

04/21/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SPADAVECCHIA, JOHN JR
Address: P O BOX 5232
City-St-Zip: MOORESVILLE, NC 28117

Title: SD () Delete
Name: SPADAVECCHIA, VINCENT
Address: 5780 NW 62 TERR
City-St-Zip: PARKLAND, FL 33067

Title: TD () Delete
Name: SPADAVECCHIA, DOMINICK
Address: 928 HYACINTH DR
City-St-Zip: DELRAY BEACH, FL 33483

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change () Addition
Name: SPADAVECCHIA, VINCENT
Address: 125 NO CONGRESS AVE 1 & 2
City-St-Zip: DELRAY BEACH, FL 33444

Title: TD (X) Change () Addition
Name: SPADAVECCHIA, DOMINICK
Address: 125 NO CONGRESS AVE 1 & 2
City-St-Zip: DELRAY BEACH, FL 33444

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: D SPADAVECCHIA

TD

04/21/2009

Electronic Signature of Signing Officer or Director

Date