


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 12, 2007 08:00 AM
Secretary of State

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|---|---|
| DOCUMENT # P02000039514 1. Entity Name P.T.M. TILE CO. |  |
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| Principal Place of Business 306 NW 107TH AVE CORAL SPRINGS, FL 33071 | Mailing Address 306 NW 107TH AVE CORAL SPRINGS, FL 33071 |
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03082007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

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| 4. FEI Number 47-0861042 | Applied For Not Applicable |
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5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

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| 6. Name and Address of Current Registered Agent ARCILESI, GIUSEPPE 306 NW 107TH AVE CORAL SPRINGS, FL 33071 | DO NOT WRITE IN THIS SPACE |
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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  (NOTE: Registered Agent signature required when reconstituting) DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

| 10. OFFICERS AND DIRECTORS | |
|--|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PVST ARCILESI, GIUSEPPE 306 NW 107TH AVE CORAL SPRINGS, FL 33071 |
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03/22/07-80054-003 158.75

**DO NOT WRITE
IN THIS SPACE**

12. I hereby 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 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:  **Giuseppe Arcilesi** 03/08/07 954-341-5197
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #