

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000050826

FILED  
Aug 08, 2005  
Secretary of State

Entity Name: EUROPEAN CLASSIC TILE & MARBLE DESIGN, INC.

## Current Principal Place of Business:

15800 BROTHER COURT  
FT. MYERS, FL 33912

## New Principal Place of Business:

814 NE 4 STR  
HALLANDALE, FL 33009

## Current Mailing Address:

15800 BROTHER COURT  
#5  
FT. MYERS, FL 33912

## New Mailing Address:

84 NE 4 STR  
HALLANDALE, FL 33009

FEI Number: 01-0728489

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

TIMIS, VICTORIA  
4741 VARSITY CIRCLE  
LEHIGH ACRES, FL 33971 US

## Name and Address of New Registered Agent:

TIMIS, VICTORIA  
814 NE 4 STR  
HALLANDALE, FL 33009 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: VICTORIA TIMIS

08/08/2005

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:

Title: PSTD ( ) Delete  
Name: TIMIS, VICTORIA  
Address: 4741 VARSITY CIRCLE  
City-St-Zip: LEHIGH ACRES, FL 33971

Title: STD ( ) Delete  
Name: CRETU, GEORGE  
Address: 4741 VARSITY CIRCLE  
City-St-Zip: LEHIGH ACRES, FL 33971

Title: D ( ) Delete  
Name: BOGDAN, LOVRIN I  
Address: 2213 LINCOLN STREET  
City-St-Zip: HOLLYWOOD, FL 33020

Title: D ( ) Delete  
Name: BRATU, NICOLAE  
Address: 1101 NE 4 COURT  
City-St-Zip: HALLANDALE, FL 33009

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change ( ) Addition  
Name: TIMIS, VICTORIA  
Address: 814 NE 4 STR  
City-St-Zip: HALLANDALE, FL 33009

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: VICTORIA TIMIS

PSTD

08/08/2005

Electronic Signature of Signing Officer or Director

Date