

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 10, 2005 8:00 am
Secretary of State

03-10-2005 90141 030 ***150.00

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1. Entity Name
ITAMARATY TILE & MARBLE INSTALLATIONS, CORP.



Principal Place of Business
2641 NE 9TH TERR
POMPANO BEACH, FL 33064

Mailing Address
2641 NE 9TH TERR
POMPANO BEACH, FL 33064

DO NOT WRITE IN THIS SPACE



02282005 No Chg-P CR2E034 (10/03)

4. FEI Number
32-0021849

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

RODRIGUES, MARLI B
2641 NE 9TH TERR
POMPANO BEACH, FL 33064

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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: _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS

TITLE PD
NAME **RODRIGUES, MARLI B**
STREET ADDRESS 2641 NE 9TH TERR
CITY-ST-ZIP POMPANO BEACH, FL 33064

TITLE VD
NAME **RODRIGUES, ITALO**
STREET ADDRESS 2641 NE 9TH TERR
CITY-ST-ZIP POMPANO BEACH, FL 33064

TITLE SD
NAME **RODRIGUES, ITAMAR B**
STREET ADDRESS 2641 NE 9TH TERR
CITY-ST-ZIP POMPANO BEACH, FL 33064

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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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: _____

Marli B. Rodrigues
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

02/28/05
Date

Daytime Phone #