2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 19, 2007 8:00 am Secretary of State

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DOCUMENT # P02000074222 1. Entity Name GRIREZ TILES & MARBLES INC.								03-19-20	007 90055 0)42 ***150	0.00
Principal Place of Business Mailing Address					' <u></u>		- 0.09	n 0 2 2			
230 NE 51 S	TREET		230 NE 51 STREET				400	36833			
#1 #1 MIAMI, FL 33137 #1 MIAMI, FL 33137							•				
IVIIPUVII, FL 3.	3137		MIAMI, FL 33137				 	 	 		
		ess - No P.O. Box#	3. Mailing Address	rok	TE	~ 4					
938 / Suite, Apt.		8 m TERA	938 Nω Suite, Apt. #, etc.	29 5	- 10	M					
cato, Apt.	n, 010.		Builte, Apr. #, etc.				03142007	Chg-P	CR2E	034 (12/06)	
City & State		FLORIDA	City & State M 1AM 1 -	Flo	RIDA	,	4. FEI Numi 02-06				plied For Applicable
Zip 3312		Country DAD &	Zip 33127	Coun	NO E			e of Status Desi		\$8.75 Add Fee Require	
	6. Name	and Address of Current F	Registered Agent		Name			d Address of N		Agent	
GRIGGIO, JUAN C					GRIGGIO JUAN C						
230 NE 51	STREET				Street Ad	dress (F	P.O. Box Num と WW	ber is Not Acres	table) TEM	4	
#1 MIAMI, FL	33137										
		1			City		. 4			Zig Cod	θ _
8. The above	named salf	//	the purpose of changing	·		414	•	1 C	Fl	<u>- 33</u>	127
	ions of regist		the purpose of changing	us registere	ea onice or	register	eo agent, or o	oin, in the State			•
SIGNATURE	s /W	TT///							07/	14/07	
SIGNATURE,	Signoure, typed	or physical name of registered agent a	nd title if applicable (N	OTE Registere	d Agent signatu	ne required	when reinstating)		DATE		****
	1 200		9. Election Camp	naiga Einar	acina	e c	00		***************************************		
FIL After Ma	E NOW!!! ay 1, 200	FEE IS \$150.00 7 Fee will be \$550.0		•			00 May Be ed to Fees				
10.		OFFICERS AND I	DIRECTORS	11,			ADDITIONS	 S/CHANGES TO	OFFICERS AN	D DIRECTOR	S IN 11
TITLE	Р	OF FIGURE AND	Delete	TITLE	E	P	ADDITION	STOTIANGES TO	OT TOLING AN	Change	Addition
NAME	GRIGGIO	, JUAN C	7, 5,000	NAM	ŧ	1	GG10.	JULAN	C.		
STREET ADDRESS CITY-ST-ZIP	7	- 3TREET - 33137 - -			E1 ADDRESS - ST- ZIP	93	2 NW	JU4N 585	TERR		
	Nataliai, Fi				····		Am 1 -	FL 33		Change.	☐ Addition
TITLE NAME			☐ Delete	TITLE NAM						☐ Change	☐ Addition
STREET ADDRESS				\$1RE	ET ADDRESS						
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TITLE			☐ Delete	TITLE						Change	Addition
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CITY-\$1-ZIP					-ST-ZIP						
TITLE			☐ Delete	TITL	 E					☐ Change	Addition
NAME				NAM	IE .						
STREET ADDRESS				•	ET ADDRESS						
CITY-ST-ZIP					'-ST-ZIP						- Leave
NAME			☐ Delete	1ITU Nam						☐ Change	☐ Addition
STREET ADDRESS					EET ADDRESS						
CITY-ST-ZIP				CITY	-ST-ZIP						
TITLE			☐ Delete	TITL	E					Change	☐ Addition
NAME OTREET ADDRESS				NAM							
STREET ADDRESS CITY-ST-ZIP					EET ADDRESS '-ST-ZIP						
12 hereby i	L certify that th	e information supplied with	this filing does not qualify	for the ex	emptions c	ontainen	I in Chapter 1	19, Florida Statu	ites. I further ce	rtify that the in	nformation
indicated of the cor changed	on this reportion or to or on all or or or all or or or all or or all or or or all or or or all or or or all or	rt or supplemental report is he receiver of trustee empo achment with an address	true and accurate and the owered to execute this rep with a cinerake empower	at my signa ort as requ ed	iture shall h ired by Cha	ave the sapter 607	same legal eff 7. Florida Statu	ect as if made u ites; and that my	nder oath; that I name appears	am an officer in Block 10 o	or director r Block 11 if

07/14/07

Daytirtle Phone #