

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 19, 2004 8:00 am
Secretary of State

07-19-2004 90006 020 ***150.00

DOCUMENT # P03000008891

1. Entry Name
MR PROFESSIONAL TILE & MARBLE, INC.



Principal Place of Business
3545 N.E. 166 ST.#309
N. MIAMI BEACH, FL 33160

Mailing Address
3545 N.E. 166 ST.#309
N. MIAMI BEACH, FL 33160

54063217



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

07152004 Chg-P CR2E034 (10/03)

City & State

City & State

4. FEI Number
01-0764704

Applied For
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

RODRIGUEZ, MARIO A
3545 N.E. 166 ST.#309
N. MIAMI BEACH, FL 33160

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 \$550.00
Due by September 8, 2004

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DP
RODRIGUEZ, MARIO A
3545 N.E. 166 ST.#309
N. MIAMI BEACH, FL 33160 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
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STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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:

Mario Rodriguez
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

7-15-04 **305-949-7943**

Daytime Phone #

Attachment

54063217
3545 N.E. 166 ST # 309
NORTH MIAMI BEACH, FL 33160

MR PROFESSIONAL TILE & MARBLE, INC

July 15, 2004

Florida Department of State
Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500
Attn. ANNUAL REPORTS SECTION


REF: Annual report/uniform business report
DOCUMENT #. P03000008891

We never received notification of Annual report for the year 2004.

We are asking you to please waive the late fee, attached you will find the corrected 2004 FOR PROFIT CORPORATION ANNUAL REPORT, with a check for the amount of \$150.00.

We will like to thank your understanding and prompt response.

Sincerely,


MARIO A RODRIGUEZ
PRESIDENT

ATTACHEMNTS: 2004 FOR PROFIT CORPORATION

Check