

2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Aug 16, 2005 8:00 am
Secretary of State

08-16-2005 90038 041 ***150.00

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DOCUMENT # P03000008891 1. Entity 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		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		4. FEI Number 01-0764704	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent RODRIGUEZ, MARIO A 3545 N.E. 166 ST. #309 N. MIAMI BEACH FL 33160			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City		
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.			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
SIGNATURE <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: registered Agent signature required when reinstating)</small>			DATE 8-9-05		
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee Will Be \$550.00 Make Check Payable to Florida Department of State					
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	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> 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:			DATE 8-9-05		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<small>Date</small>		

ATTACHMENT
SD 061760

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

MR PROFESSIONAL TILE & MARBLE, INC

August 9, 2005

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

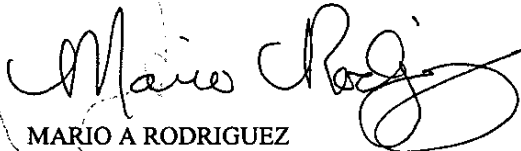
REF: Annual report/uniform business report
DOCUMENT # P03000008891

We never received notification of Annual report for the year 2005.

We are asking you to please waive the late fee, attached you will find the corrected 2005 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: 2005 FOR PROFIT CORPORATION

Check