

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2004 8:00 am
Secretary of State

05-03-2004 90493 001 *****8.75
05-03-2004 90493 002 ***150.00
05-03-2004 90493 003 *****5.00

DOCUMENT # P03000012173 1. Entity Name ERXIS TILE, MARBLE & DECO STONE, CORP.					
Principal Place of Business 995 WEST 74 STREET HIALEAH, FL 33014			Mailing Address 995 WEST 74 STREET HIALEAH, FL 33014		
2. Principal Place of Business Suite, Apt. #, etc. 12401 W OKEECHOBEE RD LOT 301		3. Mailing Address Suite, Apt. #, etc. 12401 W OKEECHOBEE RD LOT 301			
City & State HIALEAH GARDEN, FL		City & State HIALEAH GARDEN, FL		4. FEI Number 56-2354719	
Zip 33018		Country USA		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MARIN, ALEXIS 995 WEST 74 STREET HIALEAH, FL 33014			7. Name and Address of New Registered Agent Name MARIN, ALEXIS Street Address (P.O. Box Number is Not Acceptable) 12401 W OKEECHOBEE RD LOT 301 City HIALEAH GARDEN FL Zip Code 33018		
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: <u><i>Alexis Marin</i></u> (NOTE: Registered Agent signature required when reinstating) DATE: _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input checked="" type="checkbox"/> \$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	PD MARIN, ALEXIS 995 WEST 74 STREET HIALEAH, FL 33014	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ALEXIS MARIN 12401 W OKEECHOBEE RD LOT 301, HIALEAH GARDEN, FL 33018
		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD VILLAVICENCIO, JOSE E 995 WEST 74 STREET HIALEAH, FL 33014	<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"/> 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"/> 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"/> Delete		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: <u>MARIN, ALEXIS</u>			04/26/04 (305 975 3764)		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Daytime Phone #		