## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000042539

Entity Name: RADO TILE, INC.

FILED Jan 17, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

624 GOODWIND AVE. 624 GOODWIN AVE.

NEW SMYRNA BCH, FL 32169 NEW SMYRNA BCH, FL 32169

Current Mailing Address: New Mailing Address:

624 GOODWIND AVE. 624 GOODWIN AVE.

NEW SMYRNA BCH, FL 32169 NEW SMYRNA BCH, FL 32169

FEI Number: 76-0733623 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

RADO, JENNIFER
624 GOODWIND AVE.
RADO, JENNIFER
624 GOODWIN AVE.
624 GOODWIN AVE.

NEW SMYRNA BCH, FL 32169 US NEW SMYRNA BCH, FL 32169 US

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.

SIGNATURE: JENNIFER RADO 01/17/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title:

Name:

Address:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

PD () Delete Title: PD (X) Change () Addition RADO, JOSHUA Name: RADO, JOSHUA 624 GOODWIND AVE.

City-St-Zip: NEW SMYRNA BCH, FL 32169 City-St-Zip: NEW SMYRNA BCH, FL 32169

Title: VD ( ) Delete Title: VD (X) Change ( ) Addition Name: RADO, JENNIFER Name: RADO, JENNIFER

Address: 624 GOODWIND AVE.

City-St-Zip: NEW SMYRNA BCH, FL 32169

Address: NEW SMYRNA BCH, FL 32169

City-St-Zip: NEW SMYRNA BCH, FL 32169

Title: ( ) Delete Title: SEC ( ) Change (X) Addition

Name: Name: SMITH, JORY
Address: Address: 624 GOODWIN AVE

City-St-Zip: City-St-Zip: NEW SMYRNA BEACH, FL 32169 US

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JENNIFER RADO VP 01/17/2004