

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000050535

Entity Name: MIKE SARDI TILE & MARBLE INC.

FILED  
Sep 01, 2009  
Secretary of State

## Current Principal Place of Business:

233 SANTA BARBARA BLVD.  
CAPE CORAL, FL 33991

## New Principal Place of Business:

## Current Mailing Address:

233 SANTA BARBARA BLVD.  
CAPE CORAL, FL 33991

## New Mailing Address:

FEI Number: 16-1645506

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SARDI, MIKE J  
233 SANTA BARBARA BLVD.  
CAPE CORAL, FL 33991 US

## Name and Address of New Registered Agent:

ALL FLORIDA FIRM INC  
813 DELTONA BLVD  
STE A  
DELTONA, FL 32725 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: DEVIN NEWMAN FOR ALL FLORIDA FIRM INC

09/01/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: SARDI, MIKE  
Address: 233 SANTA BARBARA BLVD.  
City-St-Zip: CAPE CORAL, FL 33991 US

Title: VP ( ) Delete  
Name: SARDI, WILLIAM S  
Address: 108 SE 46TH ST.  
City-St-Zip: CAPE CORAL, FL 33904 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: MIKE SARDI

P

09/01/2009

Electronic Signature of Signing Officer or Director

Date