

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000053549

FILED  
Jun 07, 2006  
Secretary of State

Entity Name: NEW FOCUS TILE & MARBLE, INC.

## Current Principal Place of Business:

5309 SUMMERLIN RD # 5  
FT MYERS, FL 33919

## New Principal Place of Business:

18601 CEDAR DR W  
FORT MYERS, FL 33912

## Current Mailing Address:

5309 SUMMERLIN RD #5  
FT MYERS, FL 33919

## New Mailing Address:

18601 CEDAR DR W  
FORT MYERS, FL 33912

FEI Number: 75-3116244

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

AMORIM, CLODOALDO  
5309 SUMMERLIN RD #5  
FORT MYERS, FL 33919 US

## Name and Address of New Registered Agent:

AMORIM, CLODOALDO  
18601 CEDAR DR W  
FORT MYERS, FL 33912 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:

06/07/2006

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: PD ( ) Delete  
Name: AMORIM, CLODOALDO  
Address: 5309 SUMMERLIN RD #5  
City-St-Zip: FORT MYERS, FL 33919

Title: VPD ( ) Delete  
Name: AMORIM, ANTONIO METON  
Address: 5309 SUMMERLIN RD #5  
City-St-Zip: FORT MYERS, FL 33919

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: AMORIM, CLODOALDO  
Address: 18601 CEDAR DR W  
City-St-Zip: FORT MYERS, FL 33912

Title: VPD (X) Change ( ) Addition  
Name: AMORIM, ANTONIO METON  
Address: 18601 CEDAR DR W  
City-St-Zip: FORT MYERS, FL 33912

Title: T ( ) Change (X) Addition  
Name: MAIA, DANIEL A  
Address: 18601 CEDAR DR W  
City-St-Zip: FORT MYERS, FL 33912

I hereby certify that the information supplied with this filing does not qualify for the 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: CLODOALDO AMORIM

P

06/07/2006

Electronic Signature of Signing Officer or Director

Date