2004 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

DOCUMENT # P03000090935 FILED BURNS TILE SETTERS, INC. 04 OCT -8 PM 1: 07 SECRETARY OF STATE Principal Place of Business Mailing Address TALLAHASSEE, FLORIDA 6006 SLADE ROAD 6006 SLADE ROAD NORTH PORT, FL 34287 NORTH PORT, FL 34287 2.) Principal Place of Business 3. Mailing Address 5380 REDWOOD TERRACE 5380 REDWOOD TERRACE Suite, Apt. #, etc. Suite, Apt. #, etc 10012004 Chg-P CR2E034 (10/03) 4. FEI Number... Applied For NORTH PORT, FL NORTH PORT FL 55-0844531 Not Applicable Country \$8.75 Additional 34286 5. Certificate of Status Desired USA 34286 USA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MYERS, BRENT J Street Address (P.O. Box Number is Not Acceptable) 3859 BEE RIDGE ROAD STE 101 SARASOTA, FL 34233 City Zip Code 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. Signature, typed or printed name of registered agent and title it applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing **\$5.00** May Be In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. corporation did not receive the prior notice. Added to Fees Due by September 8, 2004 OFFICERS AND DIRECTORS 10. 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 D TITLE ☐ Delete TITLE ☐ Change BURNS, JOHN NAME NAME ' STREET ADDRESS 6006 SLADE ROAD STREET ADDRESS 400041730984 NORTH PORT, FL 34287 CITY-ST-ZIP C/TY-ST-7IP 10/08/04--01065--004 **150.00 ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7/P ☐ Delete TITLE TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 12. Thereby 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 witryan address, with all other like empowered.

BURNS TILE SETTERS, INC. 5380 Redwood Terrace North Port, Florida 34286

October 1, 2004

DIVISION OF CORPORATIONS

P.O. Box 6198

Tallahassee, Florida 32314-6198

Re: Annual Uniform Business Report, 2004

F.E.I.N. 55-0844531

Dear Sir/Madam:

This letter is to request that the Florida Department of State reinstates BURNS TILE SETTERS, INC., F.E.I.N. 55-0844531, to an active status without penalty.

Our report was not filed in a timely manner due to never receiving notice from the State regarding the 2004 Annual Uniform Business Report. Enclosed please find our check in the amount of \$150.00 to cover the original filing fee along with our report.

Please notify us of your response to this letter in writing to the above address.

Thank you for your consideration and assistance in this matter.

Verv_truly_vours,

John Burns

Enclosures

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