## 2005 FOR PROFIT CORPORATION

## Apr 06, 2005 08:00 AM Secretary of State ANNUAL REPORT DOCUMENT # P03000094172 1. Entity Name TIMOTHY A. MENZER TILE & MARBLE, INC. Principal Place of Business Mailing Address 19037 ARNOLD DRIVE 19037 ARNOLD DRIVE TEQUESTA, FL 33469 TEQUESTA, FL 33469 No Chg-P 04012005 CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 20-0183397 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent CORPORATE CREATIONS NETWORK INC. DO NOT WRITE 11380 PROSPERITY FARMS ROAD #221E PALM BEACH GARDENS, FL 33410 IN THIS SPACE 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 if applicable. (NOTE Registered Agent signature required when reinstating) DATE **\$5.00** May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Confribution. After May 1, 2005 Fee will be \$550.00 Added to Fees 10 OFFICERS AND DIRECTORS TITLE NAME MENZER, TIMOTHY A STREET ADDRESS 19037 ARNOLD DRIVE CITY - ST - ZIP TEQUESTA, FL 33469 TITLE 000000290196 04/06/05-80050-022 150.00 NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-S1-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

12. I hereby certify that the information supplied with this filling 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:

STREET ADDRESS CITY-ST-ZIP

> MEMBER A. MENZER OFFICER OR DIRECTOR

57/-308-0693

FILED