

**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 19, 2007 08:00 A**  
**Secretary of State**

**DOCUMENT # P03000107614**

1. Entity Name  
N.C. TILE & CARPET OF MARATHON, INC.



Principal Place of Business  
10899 OVERSEAS HIGHWAY  
MARATHON, FL 33050 US

Mailing Address  
10899 OVERSEAS HIGHWAY  
MARATHON, FL 33050 US



03092007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 20-0309525	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

**6. Name and Address of Current Registered Agent**

ROBLETO, ALBERTO  
10899 OVERSEAS HIGHWAY  
MARATHON, FL 33050

**DO NOT WRITE  
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

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00** May Be  
Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE	P
NAME	ROBLETO, ALBERTO A
STREET ADDRESS	10899 OVERSEAS HIGHWAY
CITY-ST-ZIP	MARATHON, FL 33050

TITLE	V
NAME	ABARCA, MARLON
STREET ADDRESS	P.O. BOX 3182
CITY-ST-ZIP	KEY LARGO, FL 33037

TITLE	S
NAME	ROBLETO, MELBA L
STREET ADDRESS	10899 OVERSEAS HIGHWAY
CITY-ST-ZIP	MARATHON, FL 33050

TITLE	T
NAME	ABARCA, SYLVIA
STREET ADDRESS	P.O. BOX 3182
CITY-ST-ZIP	KEY LARGO, FL 33037

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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03/28/07-80071-008 150.00

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Alberto Robleto  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/16/07  
Date

305-2893019  
Daytime Phone #