

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000108011

FILED
Jan 22, 2004
Secretary of State

Entity Name: STREHLE CUSTOM TILE INC.

Current Principal Place of Business:

5404 CHARBAR DR
PENSACOLA, FL 32526

New Principal Place of Business:

Current Mailing Address:

5404 CHARBAR DR
PENSACOLA, FL 32526

New Mailing Address:

FEI Number: 90-0117012

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED
1000 WEST AVENUE
SUITE 1114
MIAMI BEACH, FL 33139 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: STREHLE, WILLIAM
Address: 5404 CHARBAR DR
City-St-Zip: PENSACOLA, FL 32526

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

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP () Change (X) Addition
Name: STREHLE, PERRY R
Address: 244 HWY 90W
City-St-Zip: HOLT, FL 32564

Title: T () Change (X) Addition
Name: ARNOLD, MARTHA J
Address: 5439 PENNY CREEK RD.
City-St-Zip: HOLT, FL 32564

Title: S () Change (X) Addition
Name: WILSON, LOIS L
Address: 244 HWY 90W
City-St-Zip: HOLT, FL 32564

I hereby certify that the information supplied with this filing does not qualify for the 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 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: PERRY STREHLE

VP

01/22/2004

Electronic Signature of Signing Officer or Director

_____ Date