

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P03000108871

FILED
Oct 18, 2006
Secretary of State**Entity Name:** NEWELL TILE AND MARBLE INC.**Current Principal Place of Business:**2520 BEUNA VISTA BLVD.
VERO BEACH, FL 32960**New Principal Place of Business:****Current Mailing Address:**2520 BEUNA VISTA BLVD.
VERO BEACH, FL 32960**New Mailing Address:****FEI Number:** 06-1709669**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**NEWELL, CLIFTON R
2520 BEUNA VISTA BLVD.
VERO BEACH, FL 32960 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

OFFICERS AND DIRECTORS:

Title: DIR () Delete
Name: NEWELL, CLIFTON R
Address: 2520 BEUNA VISTA BLVD
City-St-Zip: VERO BEACH, FL 32960

Title: SEC () Delete
Name: NEWELL, DENISE M MS
Address: 1774 S.W. COLLEGE ST.
City-St-Zip: STUART,, FL 34997

Title: TRES () Delete
Name: ELLMAN, ROBERT MR
Address: 1774 S.W. COLLEGE ST.
City-St-Zip: STUART, FL 34997

Title: V.P () Delete
Name: NEWELL, QUESTON L MR
Address: 1774 S.W. COLLEGE ST
City-St-Zip: SUART, FL 34997

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: ACC (X) Change () Addition
Name: GOLDEN, TOMMY
Address: 4470 SCHWAB RD.
City-St-Zip: FORT PIERCE, FL 34997

Title: ADM () Change (X) Addition
Name: FRENCH, MARTIN
Address: 38TH COURT
City-St-Zip: OKEECHOBEE, FL 34997

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: CLIFTON NEWELL

DIR

10/18/2006

Electronic Signature of Signing Officer or Director

Date