## 2008 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P03000114339

1504 HONOR CT

LEHIGH ACRES, FL 33971

Address:

City-St-Zip:

Entity Name: STYLE TILE & MARBLE INC.

FILED Jan 24, 2008 Secretary of State

Titley Ita		iee a mi moee moe.			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
2104 SW ( CAPE CO	41 ST. RAL, FL 3391	4			
Current N	lailing Addres	ss:	New Mailing Address	New Mailing Address:	
2104 SW 4 CAPE CO	41 ST. RAL, FL 3391	4			
FEI Number	: 90-0126039	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	d Address of C	Current Registered Agent:	Name and Address o	f New Registered Agent:	
1504 HON	DES, MARCEL IOR CT ICRES, FL 339				
	e named entity e of Florida.	submits this statement for the	purpose of changing its registered	d office or registered agent, or both,	
SIGNATU	RE: MARCEL	O M. FERNANDES			
	Electron	nic Signature of Registered Ag	ent	Date	
		3(2)(b), F.S., the corporation did no	ot receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	P ( FERNANDES, I 4001 SW 17 TI LEHIGH ACRE	H PL	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	VP ( GEQUELIN, MA 1504 HONOR ( LEHIGH ACRE	CT	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	T ( FERNANDES, 1 1504 HONOR ( LEHIGH ACRE	CT	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name:	,	) Delete R, MARCELO M	Title: Name:	( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify 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.

Address:

City-St-Zip:

SIGNATURE: MARCELO M. FERNANDES P 01/24/2008