2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000118383

1. Entity Name
MARK GREEN TILE INC



Principal Place of Business

43105 BEAR LAKE BLVD DELAND, FL 32720

TITLE
NAME
STREET ADDRESS
CHY-ST-ZIP

Mailing Address

P O BOX 513 PAISLEY, FL 32767

FILED Apr 06, 2006 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

02062006 No Chg-P CR2E034 (11/05)

4. FEI Number 55-0850968 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

				a. Cennicate	oi Sialus Desired	Fee Required	
6. Name and Address of Current Registered Agent							
GREEN, MARK A 43105 BEAR LAKE BLVD DELAND, FL 32720				DO NOT WRITE IN THIS SPACE			
	named entity submits this statement for the plans of registered agent.	ourpose of changing its registere	od office or re	gistered agent, or bo	ith, in the State of Flor	ida. I am lamiliar with, and accept	
SIGNATURE	Signature, typed or printed name of registered agent and title	if applicable (NOTE: Registered	Agent signature:	equired when reinstaling)		DATE	
Fil. After Ma	E NOWIII FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	Election Campaign Finan Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees			
10.	OFFICERS AND DIREC	CTORS	I		<u> </u>		
TITLE NAME STREET ADORESS CHY-ST ZIP TITLE NAME STREET ADORESS CHY-ST-ZIP	P GREEN, MARK A 43105 BEAR LAKE BLVD DELAND, FL 32720 S GREEN, MARK A 43105 BEAR LAKE BLVD DELAND, FL 32720	- <u>-</u> -			U000 84/28/9	00493954 6-80026-020 I50.0	
NAME STREET ADDRESS CITY-ST-ZIP	T GREEN, MARK A 43105 BEAR LAKE BLVD DELAND, FL 32720	-			NOT W		
TITLE NAME STRELT ADDRESS CITY-ST-ZIP				IN .	THIS SP	ACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP							

^{12.} I hereby certify that the information supplied with this filling 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 507, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachingnit with an address, with all other like empowered.