


**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

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

<b>DOCUMENT # P03000128632</b> 1. Entity Name <b>PICCHIONE &amp; SON TILE &amp; MARBLE, INC.</b>	
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Principal Place of Business <b>4508 PAWNEE PATH VALRICO, FL 33594</b>	Mailing Address <b>4508 PAWNEE PATH VALRICO, FL 33594</b>
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03112007 No Chg-P CR2E034 (11/05)

4. FEI Number <b>30-0220238</b>	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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**DO NOT WRITE IN THIS SPACE**

6. Name and Address of Current Registered Agent  <b>PICCHIONE, JANET A 4508 PAWNEE PATH VALRICO, FL 33594</b>
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<b>DO NOT WRITE IN THIS SPACE</b>
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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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title, if applicable

**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

<b>10. OFFICERS AND DIRECTORS</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PICCHIONE, MARK 908 SILVER RIDGE WAY VALRICO, FL 33594
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PICCHIONE, ANTHONY J 4508 PAWNEE PATH VALRICO, FL 33594
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<p>U00000672787 03/29/07-80002-013 150.00</p> <p><b>DO NOT WRITE IN THIS SPACE</b></p>
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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:** *Janet Picchione* Janet Picchione Treasurer 813-651-9472 03/13/2007  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #