2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 31, 2004 8:00 am
Secretary of State
08-31-2004 90002 008 ***150.00

DOCUMENT # P03000132707
1. Entity Name
R&C CUSTOM TILE, CORP.

Principal Place of Business	Mailing Address
7239 ST AUGUSTINE RD JACKSONVILLE, FL 32217	7239 ST AUGUSTINE RD JACKSONVILLE, FL 32217

65182004 Chg-P CR2E034 (10/03)

2. Principal Place of Business	3. Mailing Address
1513 SLASH PINE CT.	1513 SLASH PINE CT.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: ORANGE PARK, FL	City & State: ORANGE PARK, FL
Zip: 32073 Country: US	Zip: 32073 Country: US

4. FEI Number 200396453 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

MISCHLER, CRYSTAL M
7239 ST AUGUSTINE RD
JACKSONVILLE, FL 32217

7. Name and Address of New Registered Agent

Name: CRYSTAL MISCHLER
Street Address (P.O. Box Number is Not Acceptable): 1513 SLASH PINE CT.
City: ORANGE PARK FL Zip Code: 32073

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: Crystal Mischler 08-26-04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
Due by September 8, 2004

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

~~In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.~~

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P MISCHLER, CRYSTAL M 7239 ST AUGUSTINE RD JACKSONVILLE, FL 32217 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P CRYSTAL MISCHLER 1513 SLASH PINE CT. ORANGE PARK, FL 32073 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V MADRY, RICHARD P JR. 7239 ST AUGUSTINE RD JACKSONVILLE, FL 32217 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V RICHARD P. MADRY 1513 SLASH PINE CT. ORANGE PARK, FL 32073 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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: Crystal Mischler 08-26-04 904-278-6747
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #