

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 05, 2007 8:00 am
Secretary of State

03-05-2007 90057 005 ***150.00

DOCUMENT # P03000134462 1. Entity Name JOE JULIANO TILE & MARBLE, INC.					
Principal Place of Business 5504 A LAKE WOOD CIRCLE MARGATE FL 33063			Mailing Address 5504 A LAKE WOOD CIRCLE MARGATE FL 33063		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		4. FEI Number 42-1613425	
5. Certificate of Status Desired ☐				Applied For ☐ Not Applicable	
6. Name and Address of Current Registered Agent STARR, STUART 315 N.E. 3RD AVE., STE. 200 FT. LAUDERDALE FL 33301				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City	
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 registering) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee Will Be \$550.00 Make Check Payable to Florida Department of State				9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY ST ZIP	D JULIANO, JOE 5504 A LAKE WOOD CIRCLE MARGATE FL 33063			TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	VP JULIANO, JOE 5504 A LAKEWOOD CIR MARGATE FL 33063			TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	T JULIANO, JOE 5504 A LAKE WOOD CIRCLE MARGATE FL 33063			TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	S JULIANO, JOE 5504 A LAKE WOOD CIRCLE MARGATE FL 33063			TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	CH JULIANO, JOE 5504 A LAKE WOOD CIRCLE MARGATE FL 33063			TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	MD JULIANO, JOE 5504 A LAKE WOOD CIRCLE MARGATE FL 33063			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 exemptions contained in Section 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 _____ JOSEPH G. JULIANO 2/5/07 934 461 4141					