

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 03, 2008 8:00 am
Secretary of State

07-03-2008 90014 006 ***150.00

DOCUMENT # P03000135294

1. Entity Name

CHARLES F RUSSO TILE & MARBLE INC



Principal Place of Business

21173 MIDWAY BLVD
PORT CHARLOTTE, FL 33952 US

Mailing Address

PO BOX 496713
PORT CHARLOTTE, FL 33949 US FL-33952
21173 MIDWAY BLVD

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

21173 MIDWAY BLVD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State
PORT CHARLOTTE FL

Zip

Country

Zip

Country

33952

U.S.A.

06022008

Chg-P

CR2E034 (12/06)

4. FEI Number

20-0407580

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

RUSSO, CHARLES
402 EAST MARION AVE.
13-B
PUNTA GORDA, FL 33950

7. Name and Address of New Registered Agent

Name

Charles Russo

Street Address (P.O. Box Number is Not Acceptable)

21173 MIDWAY BLVD

PORT CHARLOTTE

City

FL

Zip Code

33952

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when re-registering)

DATE

6-17-08

FILE NOW!!! FEE IS \$550.00
Due by September 12, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	RUSSO, CHARLES	
STREET ADDRESS	402 EAST MARION AVE 13-B	
CITY-ST-ZIP	PUNTA GORDA, FL 33950	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PD	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	RUSSO, CHARLES	
STREET ADDRESS	21173 MIDWAY BLVD	
CITY-ST-ZIP	PORT CHARLOTTE FL	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Charles F Russo

6-17-08

941-627-9933

5-7-08

ATTACHMENT

Charles F. Russo Tile & Marble Inc.

FEIN# 200407580 40109495

Doc# R03000135294

REGARDING
ANNUAL REPORT NOTICE

AS PER, NO NOTICE RECEIVED DUE TO
~~RECEIVED~~ CANCELLATION OF MY OLD P.O. BOX.
\$150.00

Charles F Russo

21173 MIDWAY BLVD.

PORT CHARLOTTE FL

33952