2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000147374

Address:

City-St-Zip:

REMEDIOS TILE & MARBOL INSTALLER II

FILED Feb 13, 2004 Secretary of State

Entity Na	me: REMED	IOS TILE & MARBOL INSTALI	LER INC.		
Current P	rincipal Plac	e of Business:	New Principal Place	New Principal Place of Business:	
2715 W KA TAMPA, F	ATHLEEN ST L 33607				
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
2715 W K/ TAMPA, F	ATHLEEN ST L 33607				
FEI Number	: 59-2659792	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
PEREZ, R 10921 AIR TAMPA, F	VIEW DR	US			
	named entity e of Florida.	submits this statement for the	purpose of changing its registere	d office or registered agent, or both,	
SIGNATU	RE:				
	Electro	onic Signature of Registered A	gent	Date	
Election Car	mpaign Financii	ng Trust Fund Contribution ().			
OFFICER	S AND DIRE	CTORS:	ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	S (OCHOA, IREN 2715 W KATH TAMPA, FL 3	ILEEN ST	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	() Delete	Title: MR. Name: REMEDIOS	() Change (X) Addition , NICOLAS P.	

Address:

City-St-Zip:

2715 W KATHLEEN ST TAMPA, FL 33607

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NICOLAS REMEDIOS P. 02/13/2004