## Apr 05, 2007 8:00 am Secretary of State 2007 FOR PROFIT CORPORATION **ANNUAL REPORT DOCUMENT # P04000008342** 04-05-2007 90140 007 \*\*\*150.00 1. Entity Name RVD TILE, INC. Principal Place of Business Mailing Address 40050994 6506 14TH AVE W 6506 14TH AVE W BRADENTON, FL 34209 BRADENTON, FL 34209 US 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03242007 CR2E034 (12/06) Chg-P City & State City & State 4. FEI Number Applied For 20-0590460 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent VAN DYKE, RANDY M Street Address (P.O. Box Number is Not Acceptable) C/O RVD TILE, INC. 6506 14TH AVE W BRADENTON, FL 34209 City FI Zip Code 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 reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2007 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. **PSTD** TITLE TITLE ☐ Delete Change ☐ Addition VAN DYKE, RANDY M NAME NAME STREET ADDRESS 6506 14TH AVE W STREET ADDRESS CITY-ST-ZIP BRADENTON, FL 34209 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. Thereby 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 officers will all other like empowered. RANDY VAN DYKE

RANDY VAN DYKE

OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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