

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jul 28, 2005 8:00 am**  
**Secretary of State**

06-17-2005 90002 016 \*\*\*150.00

<b>DOCUMENT # P04000010638</b> 1. Entity Name <b>J &amp; L TILE SPECIALIST, INC.</b>			
Principal Place of Business <b>1509 BIRCHSTONE AVE. BRANDON, FL 33511 US</b>		Mailing Address <b>1509 BIRCHSTONE AVE. BRANDON, FL 33511 US</b>	
2. Principal Place of Business <b>3405 PINE TOP DR.</b>		3. Mailing Address <b>SAMP</b>	
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 	
City & State <b>VALrico FLA.</b>		City & State 	
Zip <b>33594</b>		Country <b>USA</b>	
4. FEI Number <b>710909016</b>		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  <b>VIVAR, LAWRENCE 1509 BIRCHSTONE AVE. BRANDON, FL 33511</b>		7. Name and Address of New Registered Agent  Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div>	
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: _____ DATE: _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent Signature required when reappointing)</small>			
<b>FILE NOW! FEE IS \$550.00 Due by September 7, 2005</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
<b>10. OFFICERS AND DIRECTORS</b>		<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P VIVAR, LAWRENCE 1509 BIRCHSTONE AVE. TAMPA, FL 33511 <div style="text-align: right;"><input type="checkbox"/> Delete</div>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<div style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</div>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S/T VIVAR, JULIA 1509 BIRCHSTONE DR. TAMPA, FL 33511 <div style="text-align: right;"><input type="checkbox"/> Delete</div>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<div style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</div>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<div style="text-align: right;"><input type="checkbox"/> Delete</div>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<div style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</div>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<div style="text-align: right;"><input type="checkbox"/> Delete</div>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<div style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</div>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<div style="text-align: right;"><input type="checkbox"/> Delete</div>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<div style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</div>
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: <u>Lawrence Vivar</u> <span style="float: right;">Pue</span> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			

66025152



06142005 Chg-P CR2E034 (10/03)

ATTACHMENT  
#P04000018638

66025182

06/13/2005

Dear Sir/ Madam:

I did not received a notice to pay for my corporation, please allow me to keep my company. I am sending a check for one hundred and fifty ( \$ 150.00 ) to renew my corporation.

Thank You



Lawrence Vivar  
J & L Tile Specialist, Inc.