

# 2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000044349

Entity Name: CUTTING EDGE TILE, INC.

FILED  
May 24, 2006  
Secretary of State

## Current Principal Place of Business:

201 N. VERONA ST.  
NOKOMIS, FL 34275

## New Principal Place of Business:

2760 RIDLEY LN.  
NORTH PORT, FL 34286 FL

## Current Mailing Address:

201 N. VERONA ST.  
NOKOMIS, FL 34275

## New Mailing Address:

2760 RIDLEY LN.  
NORTH PORT, FL 34286 FL

FEI Number: 20-0894911

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WALCHLE, MATTHEW A  
201 N. VERONA ST.  
NOKOMIS, FL 34275 US

## Name and Address of New Registered Agent:

WALCHLE, MATTHEW A  
2760 RIDLEY LN.  
NORTH PORT, FL 34286 US

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.

SIGNATURE: MATTHEW A. WALCHLE

05/24/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: WALCHLE, MATTHEW A  
Address: 201 N. VERONA ST.  
City-St-Zip: NOKOMIS, FL 34275

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: WALCHLE, MATTHEW A  
Address: 2760 RIDLEY LN.  
City-St-Zip: NORTH PORT, FL 34286 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: MATTHEW A WALCHLE

P

05/24/2006

Electronic Signature of Signing Officer or Director

Date