2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jan 26, 2006 08:00 AM
Secretary of State

DOCUMENT # P04000045574

1. Entity Name

BRIAN CHAPASKO QUALITY TILE INC

Principal Place of Business	Mailing Address
13940 13TH ST DADE CITY FL 33525 US	13940 13TH ST DADE CITY FL 33525 US
2. Principal Place of Business: 13940 13th Street	3. Mailing Address: 13940 13th Street
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Dade City, FL 33525	City & State: Dade City FL 33525
Zip: 33525 Country: Pasco	Zip: 33525 Country: Pasco

1st MOORE CR2E034 (10/05)

4. FEI Number 20-0842311 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ANDY'S TAX SERVICE
36951 SR 54 WEST
ZEPHYRHILLS FL 33541

7. Name and Address of New Registered Agent

Name: NONE

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

City FL 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 acc[ept] the obligations of registered agent.

SIGNATURE: NONE

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee Will Be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May [be] Added to Fee

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	PRES	☐ Delete	TITLE		☐ Change ☐ Add
NAME	CHAPASKO, BRIAN A		NAME	U00000401986	
STREET ADDRESS	13940 13TH ST		STREET ADDRESS	02/02/06--80068--007 150.00	
CITY-ST-ZIP	DADE CITY FL 33525		CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Add
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
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NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the informat[ion] 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 dire[ctor] 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: Brian Chapasko BRIAN CHAPASKO 1-23-06 352 567-6[...]