

2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 03, 2005 8:00 am
Secretary of State

05-03-2005 90107 020 ***150.00

DOCUMENT # P04000054258

1. Entity Name

TILE BY JOSEPH GROSSO, INC.



Principal Place of Business

4601 E. HIGHWAY 100/MODDY BLVD.
UNIT 51
BUNNELL FL 32110

Mailing Address

2 PRAVER LANE
PALM COAST FL 32164

2. Principal Place of Business

3. Mailing Address

148 Point Pleasant Dr

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Palm Coast FL

Zip

Country

Zip

Country

32164

USA

4. FEI Number

830390478

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GROSSO, MARY
2 PRAVER LANE
PALM COAST FL 32164

7. Name and Address of New Registered Agent

Name

MARY GROSSO

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

148 Point Pleasant Dr.

Palm Coast, FL 32164

City

Palm Coast, FL

FL

Zip Code

32164

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

Mary Grosso

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

4-26-05

FILE NOW!!! FEE IS \$150.00.

After May 1, 2005 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 Fees

10. OFFICERS AND DIRECTORS

TITLE P ☐ Delete
NAME GROSSO, MARY
STREET ADDRESS 2 PRAVER LANE
CITY-ST-ZIP PALM COAST FL 32164

TITLE ST ☐ Delete
NAME GROSSO, JOSEPH
STREET ADDRESS 2 PRAVER LANE
CITY-ST-ZIP PALM COAST FL 32164

TITLE V ☐ Delete
NAME CLARK, JOEL
STREET ADDRESS 2 PRAVER LANE
CITY-ST-ZIP PALM COAST FL 32164

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P ☒ Change ☐ Addition
NAME GROSSO MARY
STREET ADDRESS 148 Pt. Pleasant Dr.
CITY-ST-ZIP Palm Coast FL 32164

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS 148 Pt. Pleasant Dr
CITY-ST-ZIP Palm Coast FL 32164

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS 30 Village Dr
CITY-ST-ZIP Flagler Bch, FL 32136

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

Mary Grosso MARY GROSSO

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-26-05 386 206-9893

Date

Daytime Phone #