## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Feb 01, 2006 08:00 AM Secretary of State

1. Entity Name	MENT # P04000604 MARBLE & TILE, INC.	32		Secretary	of State
Principal Place 2425 CANCUI KISSIMMEE, F	N CT	Mailing Address 2425 CANCUN CT KISSIMMEE, FL 34743			
D	O NOT WRITE	IN THIS SPA	CE	01202006 No Chg-P CR2E0: 4. FEI Number 20-2212943	34 (11/05) Applied For Not Applicable
	6. Name and Address of Current Re	gistered Agent	<u> </u>		\$8.75 Additional Fee Required
MATOS, RAFAEL 2425 CANCUN CT KISSIMMEE, FL 34743			DO NOT WRITE IN THIS SPACE		
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 symbol or printed waters of registered agent and title of applicable.  (NOTE Registered Agent signature required when rehistating)  DATE					
FILE NOWILL FEE IS \$150.00  After May 1, 2006 Fee will be \$550.00  9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.					
10. TITLE NAME STREET ADDRESS CITY ST-ZIP TITLE NAME	OFFICERS AND OR D MATOS, RAFAEL 2425 CANCUN CT KISSIMMEE, FL 34743	RECTORS	-	U0000041438 02/11/06-80028	5 -020 150.00
STREET ADDRESS CITY-SI-ZIP HILE NAME STREET ADDRESS CITY-SI-ZIP				DO NOT WRITE	
NAME STREET ADDRESS CITY - ST - ZIP				IN THIS SPACE	<b>=</b>
NAME STREET ADDRESS CITY-SI-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. I hereby indicated of the column changed	certify that the information supplied with the or this report or supplemental report is treporation or the receiver or trustee empower, or on an attachment with an address, with	is filing does not quality for the exue and accurate and that my sign ered to execute this report as required and the file empowered.	xemptions containe ature shall have the alred by Chapter 60	ed in Chapter 119, Florida Statutes. I further cere a same legal effect as if made under oath; that I 17. Florida Statutes; and that my name appears	

TYPED OR PRINTED NAME OF SIGHING OFFICER OR DIRECTOR