

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 26, 2006 8:00 am
Secretary of State

05-26-2006 90014 018 ***150.00

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1. Entity Name
KELLY MARBLE AND TILE, CORP.



Principal Place of Business
1036 S W 3 ST AP 3
MIAMI, FL 33130

Mailing Address
1036 S W 3 ST AP 3
MIAMI, FL 33130

50019733

2. Principal Place of Business
3512 E 8 AVE
Suite, Apt. #, etc.

3. Mailing Address
3512 E 8 AVE
Suite, Apt. #, etc.



02202006 Chg-P CR2E034 (11/05)

City & State
HIALEAH FL
Zip
33013
Country
US

City & State
HIALEAH FL
Zip
33013
Country
US

4. FEI Number
20-1114550
Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

ORTIZ, MIGUEL
1036 S W 3 ST AP 3
MIAMI, FL 33130

7. Name and Address of New Registered Agent

Name
MIGUEL ORTIZ
Street Address (P.O. Box Number is Not Acceptable)
3512 E 8 AVE
City
HIALEAH FL Zip Code
33013

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 typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

2/20/06

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> Delete
DP	ORTIZ, MIGUEL	1036 S W 3 ST AP 3	MIAMI, FL 33130	<input type="checkbox"/>
VD	ORTIZ, WILLIAM	1036 S W 3 ST AP 3	MIAMI, FL 33130	<input type="checkbox"/>
S	ORTIZ, LUIS	1036 S W 3 ST AP 3	MIAMI, FL 33130	<input type="checkbox"/>
T	ORTIZ, ALEJANDRO	1036 SW 3 STREET # 3	MIAMI, FL 33130	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	3512 E 8 AVE	Hialeah	FL 33013	<input type="checkbox"/>
	3512 E 8 AVE	Hialeah	FL 33013	<input type="checkbox"/>
	3512 E 8 AVE	Hialeah	FL 33013	<input type="checkbox"/>
	3512 E 8 AVE	Hialeah	FL 33013	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/20/06

Date

Daytime Phone #