

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000105824

FILED  
Apr 26, 2005  
Secretary of State

Entity Name: ITALKITCHEN AND TILE GROUP, INC.

## Current Principal Place of Business:

300 PLAZA DRIVE  
VESTAL, NY 13850

## New Principal Place of Business:

## Current Mailing Address:

300 PLAZA DRIVE  
VESTAL, NY 13850

## New Mailing Address:

FEI Number: 20-2333121

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NRAI SERVICES, INC.  
2731 EXECUTIVE PARK DRIVE  
SUITE 4  
WESTON, FL 33331 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P ( ) Change (X) Addition  
Name: KOFFMAN, DAVID  
Address: 300 PLAZA DRIVE  
City-St-Zip: VESTAL, NY 13850 US

Title: VP ( ) Change (X) Addition  
Name: KOFFMAN, JEFFREY  
Address: 1775 BROADWAY  
City-St-Zip: NEW YORK, NY 10019 US

Title: CEO ( ) Change (X) Addition  
Name: KOFFMAN, BURTON  
Address: 300 PLAZA DRIVE  
City-St-Zip: VESTAL, NY 13850 US

Title: S ( ) Change (X) Addition  
Name: RITTBERG, HOWARD  
Address: 450 PLAZA DRIVE  
City-St-Zip: VESTAL, NY 13850 US

Title: T ( ) Change (X) Addition  
Name: NOLT, ROBERT C  
Address: 300 PLAZA DRIVE  
City-St-Zip: VESTAL, NY 13850 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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: DAVID KOFFMAN

P

04/26/2005

Electronic Signature of Signing Officer or Director

Date