

**2006 FOR PROFIT CORPORATION
AMENDED ANNUAL REPORT**

DOCUMENT # P04000108667

1. Entity Name
DESIGNER TILE & MARBLE, CORP.



Principal Place of Business
2317 FERN CIRCLE
TAMPA, FL 33604

Mailing Address
2317 FERN CIRCLE
TAMPA, FL 33604

2. Principal Place of Business
5531 Pentail Cir.

3. Mailing Address
Same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
Tampa, FL

City & State

Zip
33625

Zip

Country

12062006 Chg-P CR2E034 (11/05)

FILED
07 JAN -2 AM 9:37

FLORIDA STATE
TALLAHASSEE, FLORIDA



4. FEI Number
20-1402611

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

PEREDA, JOSE O
2317 FERN CIRCLE
TAMPA, FL 33604

7. Name and Address of New Registered Agent

Name

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 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

Amended AR is \$61.25

9. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P
NAME PEREDA, JOSE O
STREET ADDRESS 2317 FERN CIRCLE
CITY-ST-ZIP TAMPA, FL 33604

Delete

TITLE VP
NAME GONZALEZ, JOSE A
STREET ADDRESS 2317 FERN CIRCLE
CITY-ST-ZIP TAMPA, FL 33604

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Delete

11.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

0000082919570
01/02/07-01080-010 **70.00

Change Addition

Change Addition

Change Addition

Change Addition

Change Addition

Change Addition

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 any address with all other like empowered.

SIGNATURE:

Joe O. Pereda Jose O. Pereda 12/06/06 813.962.1362
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #