

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000121031

Entity Name: ABSOLUT TILE & MARBLE INC

FILED
May 18, 2006
Secretary of State

Current Principal Place of Business:

1418 S. LARKWOOD SQUARE
FORT MYERS, FL 33919 US

New Principal Place of Business:

Current Mailing Address:

1418 S. LARKWOOD SQUARE
FORT MYERS, FL 33919 US

New Mailing Address:

FEI Number: 20-1518791

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TOCKET, JEFFREY
1418 S. LARKWOOD SQUARE
FORT MYERS, FL 33919 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: TOCKET, NICOLE
Address: 1418 S. LARKWOOD SQUARE
City-St-Zip: FORT MYERS, FL 33919 US

Title: D,T () Delete
Name: TOCKET, JEFFREY
Address: 1418 S. LARKWOOD SQUARE
City-St-Zip: FORT MYERS, FL 33919 US

Title: VP () Delete
Name: ESTRELLA, JOCELY
Address: 1413 NE 15TH TERRACE
City-St-Zip: CAPE CORAL, FL 33909 US

Title: D,S () Delete
Name: ESTRELLA, JOSE
Address: 1413 NE 15TH TERRACE
City-St-Zip: CAPE CORAL, FL 33909 US

Title: D () Delete
Name: LOMANO, DAWANA
Address: 13839 LILY PAD CIRCLE
City-St-Zip: FORT MYERS, FL 33907 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: JEFFREY TOCKET

T

05/18/2006

Electronic Signature of Signing Officer or Director

Date