2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000121374 1. Entity Name GUILLEN'S EXPRESS TILE & MARBLE, INC.

Principal Place of Business

5405 5TH STREET WEST LEHIGH ACRES, FL 33971 Mailing Address

5405 5TH STREET WEST LEHIGH ACRES, FL 33971 FILED
Mar 01, 2007 08:00 AM
Secretary of State



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

 01232007
 No Chg-P
 CR2E034 (11/05)

 4. FEI Number 11-3724999
 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

Daytime Phone #

GUILLEN, ROBERTO A 5405 5TH STREET WEST LEHIGH ACRES, FL 33971

SIGNATURE

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, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating) DATE							
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Final Trust Fund Contribution.			cing	\$5.00 May Be Added to Fees			
10.	OFFICERS AND DIREC	,	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEOP GUILLEN, ROBERTO A 5405 5TH STREET WEST LEHIGH ACRES, FL 33971						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V GUILLEN, ERVIN A 3970 20 PL SW NAPLES, FL 34116			·	U00000652 03/12/07-800	2493 020-017 1	58.75
TITLE NAME STREET ADDRESS CITY-ST-ZIP			· ·	DO	NOT WR	ITE	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP			9				
TITLE NAME STREET ADDRESS CITY-ST-ZIP					. \$		
12. I hereby certify that the information supplied with this filling 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 trusted 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 addressy with all other like empowered.							