
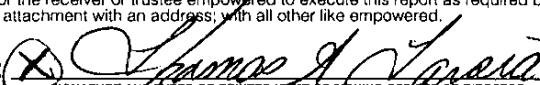


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 21, 2007 8:00 am
Secretary of State

05-21-2007 90051 021 ***150.00

DOCUMENT # P05000003602 1. Entity Name TJM TILE ENTERPRISES, INC.			
Principal Place of Business 209 SW 42ND STREET CAPE CORAL, FL 33914 US		Mailing Address 209 SW 42ND STREET CAPE CORAL, FL 33914 US	
2. Principal Place of Business - No P.O. Box # 2115 SW 39th STREET Suite, Apt. #, etc.		3. Mailing Address 2115 SW 39th STREET Suite, Apt. #, etc.	
City & State CAPE CORAL, FL Zip 33914 Country US		City & State CAPE CORAL, FL Zip 33914 Country US	
4. FEI Number 20-2152321		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent TARSIA, THOMAS A 209 SW 42ND STREET CAPE CORAL, FL 33914		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 2115 SW 39th STREET City CAPE CORAL, FL Zip Code 33914	
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____			
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$650.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRES TARSIA, THOMAS A 209 SW 42ND STREET CAPE CORAL, FL 33914 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	2115 SW 39th STREET CAPE CORAL, FL - 33914 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP TARSIA, JASON A 209 SW 42ND STREET CAPE CORAL, FL 33914 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	2115 SW 39th STREET CAPE CORAL, FL - 33914 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEC TARSIA, DIANE R 209 SW 42ND STREET CAPE CORAL, FL 33914 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	2115 SW 39th STREET CAPE CORAL, FL - 33914 <input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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 an address; with all other like empowered.			
SIGNATURE: 		Date 4/31/07 Daytime Phone # 239-699-7602	