

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000074455

FILED
Mar 14, 2012
Secretary of State

Entity Name: JASON CLAVETTE TILE, INC.

Current Principal Place of Business:

1586 TUSCALOOSA AVE.
HOLLY HILL, FL 32117 US

New Principal Place of Business:

Current Mailing Address:

1586 TUSCALOOSA AVE.
HOLLY HILL, FL 32117 US

New Mailing Address:

FEI Number: 20-2882759

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CLAVETTE, JASON
1586 TUSCALOOSA AVE
HOLLY HILL, FL 32117 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

OFFICERS AND DIRECTORS:

Title: P
Name: CLAVETTE, JASON
Address: 1586 TUSCALOOSA AVE.
City-St-Zip: HOLLY HILL, FL 32117 US

Title: SEC
Name: CLAVETTE, CHERI
Address: 1586 TUSCALOOSA AVE.
City-St-Zip: HOLLY HILL, FL 32117 US

Title: ADVI
Name: WHITEAKER, JASON
Address: 5TH ST
City-St-Zip: DAYTONA BEACH, FL 32114 US

Title: P
Name: CLAVETTE, JASON
Address: 1586 TUSCALOOSA AVE
City-St-Zip: HOLLY HILL, FL 32117 US

Title: P
Name: CLAVETTE, JASON
Address: 1586 TUSCALOOSA AVE
City-St-Zip: HOLLY HILL, FL 32117 US

Title: P
Name: CLAVETTE, JASON
Address: 1586 TUSCALOOSA AVE
City-St-Zip: HOLLY HILL, FL 32117 US

I hereby 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 all other like empowered.

SIGNATURE: CHERI CLAVETTE

SEC

03/14/2012

Electronic Signature of Signing Officer or Director

Date