## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000099186

Entity Name: DELTA TILE & MARBLE, INC.

FILED Mar 04, 2006 Secretary of State

Current Princip	al Place of Business:	New Princip	al Place of Business

5243 RED CEDAR DR 5309 SUMMERLIN RD

APT# 24 APT# 14

FORT MYERS, FL 33907 US FORT MYERS, FL 33919 US

Current Mailing Address: New Mailing Address:

5243 RED CEDAR DR 5309 SUMMERLIN RD

APT# 24 APT# 14

FORT MYERS, FL 33907 US FORT MYERS, FL 33919 US

FEI Number: 20-3143043 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ACI, PAUL
5243 RED CEDAR DR

ACI, PAUL
5309 SUMMERLIN RD

APT# 24 APT# 14 FORT MYERS, FL, FL 33907 US FORT MYERS, FL, FL 33919 US

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: PAUL ACI 03/04/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P ( ) Delete Title: P (X) Change ( ) Addition

Name: ACI, PAUL Name: ACI, PAUL

 Address:
 5243 RED CEDAR DR APT# 24
 Address:
 5309 SUMMERLIN RD APT# 14

 City-St-Zip:
 FORT MYERS, FL 33907 US
 City-St-Zip:
 FORT MYERS, FL 33919 US

Title: VP ( ) Delete Title: VP (X) Change ( ) Addition

Name:EREMIA, GHEORGHEName:EREMIA, GHEORGHEAddress:5243 RED CEDAR DR APT# 24Address:4109 RESIDENT DR #523City-St-Zip:FORT MYERS, FL 33907 USCity-St-Zip:FORT MYERS, FL 33901 US

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: PAUL ACI P 03/04/2006