

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 23, 2007 8:00 am**  
**Secretary of State**

03-23-2007 90011 042 \*\*\*150.00

**DOCUMENT # P05000120106**

1. Entity Name  
**MARBLE & TILE FLOORING INC.**



Principal Place of Business  
**5553 MALLOW STREET  
NEW PORT RICHEY, FL 34652**

Mailing Address  
**5553 MALLOW STREET  
NEW PORT RICHEY, FL 34652**



2. Principal Place of Business - No P.O. Box #  
**7622 DUCK LN**  
Suite, Apt. #, etc.

3. Mailing Address  
**7622 DUCK LN**  
Suite, Apt. #, etc.

01082007 Chg-P CR2E034 (12/06)

City & State  
**NEW PORT RICHEY FL**

City & State

4. FEI Number  
**20-3381586**

Applied For  
☐ Not Applicable

Zip Country  
**34653 PASCO**

Zip Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

## 6. Name and Address of Current Registered Agent

**BUKHAROV, SERGEY  
5553 MALLOW STREET  
NEW PORT RICHEY, FL 34652**

## 7. Name and Address of New Registered Agent

Name **BUKHAROV SERGEY**  
Street Address (P.O. Box Number is Not Acceptable)  
**7622 DUCK LN**  
City **NEW PORT RICHEY** FL Zip Code **34653**

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 **SERGEY BUKHAROV / REGISTER AGENT 03-09-07**  
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 Financing  
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

## 10. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete  
NAME **BUKHAROV, SERGEY**  
STREET ADDRESS **5553 MALLOW STREET**  
CITY-ST-ZIP **NEW PORT RICHEY, FL 34652**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

## 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS **7622 DUCK LN**  
CITY-ST-ZIP **NEW PORT RICHEY FL 34653**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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: **SERGEY BUKHAROV / PRES**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**03-09-07 (727) 798-7120**  
Date Daytime Phone #