

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000142113

FILED  
Feb 21, 2009  
Secretary of State

Entity Name: ASSIS TILE & MARBLE CORP.

## Current Principal Place of Business:

3560 COUNTY ROAD 230C  
WILDWOOD, FL 347858993 US

## New Principal Place of Business:

16767 SE HWY 301 LOT 02  
SUMMERFIELD, FL 34491 US

## Current Mailing Address:

3560 COUNTY ROAD 230C  
WILDWOOD, FL 347858993 US

## New Mailing Address:

16767 SE HWY 301 LOT 02  
SUMMERFIELD, FL 34491 US

FEI Number: 20-3638778

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SANTOS, GERSON A  
3560 COUNTY ROAD 230C  
WILDWOOD, FL 347858993 US

## Name and Address of New Registered Agent:

SANTOS, GERSON A  
16767 SE HWY 301 LOT 02  
SUMMERFIELD, FL 34491 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: GERSON A SANTOS

02/21/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: SANTOS, GERSON A  
Address: 3560 COUNTY ROAD 230C  
City-St-Zip: WILDWOOD, FL 347858993 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: SANTOS, GERSON A  
Address: 16767 SE HWY 301 LOT 02  
City-St-Zip: SUMMERFIELD, FL 34491 US

Title: VP ( ) Change (X) Addition  
Name: BRISBANE, JENNIFER L  
Address: 16767 SE HWY 301 LOT 02  
City-St-Zip: SUMMERFIELD, FL 34491

I hereby certify that the information supplied with this filing does not qualify 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: GERSON A SANTOS

PD

02/21/2009

Electronic Signature of Signing Officer or Director

Date