2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 24, 2006 8:00 am Secretary of State

DOCUMENT # P05000150713 1. Entity Name GULF COAST CERAMIC TILE, INC.								04-24-20		019 ***150	0.00
Principal Place of Business			Mailting Address					1	501	15258	
3609 31ST ST E			3609 31ST ST E						. 001	,1000	
BRADENTON, FL 34208		-	BRADENTON, FL 34208			l					
								BBIGI BRIJ BBIJI BR	III OSIDI (1861-61)	# 83111 18881 IZBB 11:	II S 1 I 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
2. Principal Place of Business			Mailing Address								
2. Thirdpaintage of beamers		•	J. Walling Address					ONILI DINE DEIN DE		II Ba iii IBBB i IJ BAB II	
Suite, Apt. #, etc.		:	Suite, Apt. #, etc.				03042006	Chg-P	CR2	E034 (11/05)	
City & State			City & State		<u> </u>		4. FEI Numbe	"200 I	189)—— <u> </u>	plied For
Zip	Country		Zip	Coun	trv				_	\$8.75 Add	t Applicable
							5. Certificate	of Status Desii —.	ed 🗌	Fee Require	d
	6. Name and Address o	f Current Regis	tered Agent				7. Name and	Address of N	ew Register	ed Agent	
MEISSNER, GREGORY C ESQ					Name						
1111 3RD AVE W #150				Street Address (P.O. Box Number is Not Acceptable)							
BRADENT	ON, FL 34205										
	-11										
₩					City				F	L Zip Cod	0
	named entity submits this stations of registered agent.	atement for the p	ourpose of changing its	registere	ed office or re	egister	ed agent, or bot	h, in the State	of Florida. Ta	am familiar with,	and accept
SIGNATURE.	Signature, typed or printed name of reg	istered agent and title	f applicable. (NOT	E: Registere	d Agent signature	required	when reinstating)		DA	E .	
	E NOWIII FEE IS \$15 ay 1, 2006 Fee will be		9. Election Campa Trust Fund Conf		ncing		00 May Be ed to Fees				
10.	OFFIC	ERS AND DIREC	CTORS	11.			ADDITIONS/	CHANGES TO	OFFICERS A	ND DIRECTOR	S IN 11
TITLE	PSTD		☐ Delete	TITLE		(PI	D)			⊠ Change	Addition
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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:

Lee Weeks SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/7/2006 (941)809-7084