## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000022265

Entity Name: FOX TILE & MARBLE, INC.

**FILED** Sep 13, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

1402 SAN SEBASTIAN AVE 444 SW MEADOW TERR

PORT ST LUCIE, FL 34953 US PORT ST LUCIE, FL 34984 US

**Current Mailing Address: New Mailing Address:** 

444 SW MEADOW TERR 1402 SAN SEBASTIAN AVE

PORT ST LUCIE, FL 34953 US PORT ST LUCIE, FL 34984 US

FEI Number: 20-4315101 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

SCHMIT, ALECIO A JR SCHMIT, ALECIO A JR 1402 SAN SEBASTIAN AVE 444 SW MEADOW TERR

PORT ST LUCIE, FL 34953 US US PORT ST LUCIE, FL 34984

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: ALECIO A SCHMIT JR 09/13/2007

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete (X) Change ( ) Addition SCHMIT, ALECIO A JR SCHMIT, ALECIO A JR Name: Name: 1402 SAN SEBASTIAN AVE 444 SW MEADOW TERR Address: Address: City-St-Zip: PORT ST LUCIE, FL 34953 US City-St-Zip: PORT ST LUCIE, FL 34984 US

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

OLIVEIRA, ADILSON M Name: Name: NUNES, JEFFERSON R 209 MADES DR 1010 MADES DR Address: Address:

FORT PIERCE, FL 34947 US FORT PIERCE, FL 34947 US City-St-Zip: City-St-Zip:

Title: Title: P/D ( ) Delete (X) Change ( ) Addition NEVES, JOAO G Name: BITTENCOURT, JEFERSON L Name: 711 MADES DR 2655 SW CADET CIRCLE Address: Address: City-St-Zip: FORT PIERCE, FL 34947 US City-St-Zip: PORT ST LUCIE, FL 34953 US

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: ALECIO A SCHMIT JR P/D 09/13/2007