

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000022265

Entity Name: FOX TILE & MARBLE, INC.

FILED
Jan 28, 2008
Secretary of State

Current Principal Place of Business:

444 SW MEADOW TERR
PORT ST LUCIE, FL 34984 US

New Principal Place of Business:

444 SW MEADOW TERR.
PORT ST LUCIE, FL 34984 US

Current Mailing Address:

444 SW MEADOW TERR
PORT ST LUCIE, FL 34984 US

New Mailing Address:

444 SW MEADOW TERR.
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 Current Registered Agent:

SCHMIT, ALECIO A JR
444 SW MEADOW TERR
PORT ST LUCIE, FL 34984 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SCHMIT, ALECIO A JR
Address: 444 SW MEADOW TERR
City-St-Zip: PORT ST LUCIE, FL 34984 US

Title: D () Delete
Name: NUNES, JEFFERSON R
Address: 1010 MADES DR
City-St-Zip: FORT PIERCE, FL 34947 US

Title: D () Delete
Name: BITTENCOURT, JEFERSON L
Address: 2655 SW CADET CIRCLE
City-St-Zip: PORT ST LUCIE, FL 34953 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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.

PD

01/28/2008

Electronic Signature of Signing Officer or Director

Date