2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 02, 2007 8:00 am Secretary of State

ANNUAL REPORT						Secretary of State				
DOCUMENT # P06000065395							05-02-2007 9	•		
1. Entity Name EL CHARRUS MARBLE, GRANITE & TILE, INC.										
Principal Place of Business			Mailing Address							
6910 BYRON AVE STE 7			6910 BYRON AVE STE 7							
MIAMI BEACH, FL 33141			MIAMI BEACH, FL 33141							
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2. Principal Place of Business - No P.O. Box #			3. Mailing Address							
Suite, Apt. #, etc.			Suite, Apt. #, etc.			04052007	Chg-P	CR2E	034 (12/06)	
City & State			City & State		4FEI Number				oplied For	
-						20	<u> </u>	<u>44 </u>	, ' 	ot Applicable
Zip _	Zip Country		Zip Cour		try	5. Certificate o	Status Desired		\$8.75 Add Fee Require	
6. Name and Address of Current Registered Agent					Ninma	7. Name and A	ddress of New Re	gistered	Agent	
MARTINEZ, WILLIAM J					Name					
6910 BYRON AVE STE 7					Street Address (1	P.O. Box Number	is Not Acceptable)		_
MIAMI BEACH, FL 33141						.				
•.					City			F	Zip Cod	le
8. The above	named entity	y submits this statement for th	e purpose of changing its	register	ed office or register	ed agent, or both	, in the State of Flo			and accept
the obligati	ions of regist	ered agent.								
SIGNATURE	Signature typed	or printed name of registered agent and	d Agent signature required	when reinstating)		DATE				
-										_
' FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00' 9. Election Campaign Fi Trust Fund Contributi						.00 May Be ed to Fees				
10.		OFFICERS AND DIF	RECTORS	11.		ADDITIONS/C	HANGES TO OFFI	CCCC AN	ID DIDECTOR	
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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: _

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/05/07

Daytime Phone #