
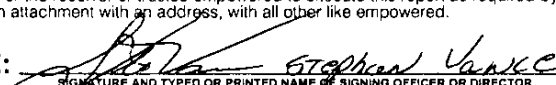


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 23, 2007 8:00 am
Secretary of State

08-23-2007 90021 048 ***150.00

DOCUMENT # P06000149569 1. Entity Name STEPHAN T. VANCE CUSTOM TILE & MARBLE, INC.					
Principal Place of Business 161 WELLSLEY AVE SW PALM BAY, FL 32908			Mailing Address 161 WELLSLEY AVE SW PALM BAY, FL 32908		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc. 161 Wellsley Ave SW		3. Mailing Address Suite, Apt. #, etc. 161 Wellsley Ave SW			
City & State PAIM BAY FL		City & State PAIM BAY FL			
Zip 32908		Country BREV		4. FEI Number 75-3244361	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent COLOMBO, JOSEPH G 2351 W EAU. GALLIE BLVD. SUITE 1 MELBOURNE, FL 32935			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when re-registering)					
FILE NOW!!! FEE IS \$550.00 Due by September 14, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PT VANCE, STEPHAN T 161 WELLSLEY AVE SW PALM BAY, FL 32908		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPS VANCE, SUSAN M 161 WELLSLEY AVE SW PALM BAY, FL 32908		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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: 			7-29-07 (321) 537-2712		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Daytime Phone #		

ATTACHMENT

40129903

To whom it may concern, #P06000149569

Please excuse our delinquency in

Payment. I was under the impressions that we had until Sept. 1 to make the 150.00 Incorporation payment. I was not aware of the 400.00 penalties that have aquired. I am a first time corp. owner, + I am very ignorant when it comes to the financial department. If you could please spare us the penalty charges of 400.00 it would be greatly appreciated. This is not + will not be a continuing issue. Thankyou.

Susan H Vance