## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P07000016344

Entity Name: DIMENSION TILE & STONE INC.

WINDERMERE, FL 34786

City-St-Zip:

FILED Feb 29, 2008 Secretary of State

y	DIIVIEI (C	NOTE TILL & OTOTE, INC.					
Current Principal Place of Business:				New Principal Place of Business:			
SUITE # 13	ER STAR RD 30 ), FL 32808						
Current Mailing Address:				New Mailing Address:			
SUITE # 13	ER STAR RD 30 ), FL 32808						
FEI Number:	: 11-3804369	FEI Number Applied For ( )	FEI Numl	ber Not App	licable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
CAPUTO, DILSON S P 5516 RAMSEN CAY LANE WINDERMERE, FL 34786 US				CAPUTO, DILSON S P 5516 REMSEN CAY LN WINDERMERE, FL 34786 US			
	named entity e of Florida.	submits this statement for the	purpose of	changing i	ts registered of	fice or registered agent, or both,	
SIGNATURE:				02/29/2008			
	Electro	onic Signature of Registered Ag	ent			Date	
Election Car	mpaign Financii	ng Trust Fund Contribution ( ).					
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	CAPUTO, DIL 5516 RAMSEI WINDERMER VP ( GONCALVES, 1552 GLENW WINDERMER	N CAY LANE E, FL 34786 US ) Delete VANDERLEI VP ICK ROAD E, FL 34786	- - - (	Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	GONCALVES, V. 285 UPTOWN B ALTAMONTE SF  VP (X) GONCALVES, R 285 UPTOWN B ALTAMONTE SF	LVD PPRINGS, FL 32701 US Change ( ) Addition OSILENE VP LVD #430 PRINGS, FL 32701	
Title: Name: Address: City-St-Zip:	GONCALVES, 1552 GLENW WINDERMER	E, FL 34786	1	Title: Name: Address: City-St-Zip:		Change ( ) Addition	
Title: Name: Address:	S ( CAPUTO, TAN 5516 RAMSEI		1	Title: Name: Address:	( )	Change () Addition	

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.

City-St-Zip:

SIGNATURE: VANDERLEI GONCALVES V.P. 02/29/2008