

# **2004 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P93000078237

**FILED**  
**Nov 22, 2004**  
**Secretary of State**

**Entity Name:** FIRENZE TILE & MARBLE, INC.

**Current Principal Place of Business:**

PO BOX 771000  
CORAL SPRINGS, FL 33077 US

**New Principal Place of Business:**

1551 SIXTY FOURTH DRIVE SOUTH  
WEST PALM BEACH, FL 33415 US

**Current Mailing Address:**

PO BOX 771000  
CORAL SPRINGS, FL 33077 US

**New Mailing Address:**

6593 SW 10TH COURT  
NORTH LAUDERDALE, FL 33068 US

**FEI Number:** 65-0447879

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

FIRENZE, MICHAEL  
1551 SIXTY FOURTH DRIVE SOUTH  
WEST PALM BEACH, FL 33415 US

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

LA DUKE, RONALD  
6593 SW 10TH COURT  
NORTH LAUDERDALE, FL 33068 US

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: RONALD LA DUKE

11/22/2004

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:**

Title: PTSD ( ) Delete  
Name: FIRENZE, MICHAEL  
Address: 1551 SIXTY FOURTH DRIVE SOUTH  
City-St-Zip: WEST PALM BEACH, FL 33415

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MICHAEL FIRENZE

PTSD

11/22/2004

Electronic Signature of Signing Officer or Director

Date