2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000078086

Address:

City-St-Zip:

11221 TAFT LANE

SEFFNER, FL 33584

FILED May 03, 2004 Secretary of State

Entity Name: TILE BY THE MILE, INC.					
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	YSHORE DR 335495029 U	S			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
	YSHORE DR 335495029 U	S			
FEI Number:	59-3269714	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
MERITT, CHRISTOPHER P 902 HOLLYSHORE DR LUTZ, FL 33549 US					
	named entity : e of Florida.	submits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,	
SIGNATUR	RE:				
Electronic Signature of Registered Agent			ent	Date	
		3(2)(b), F.S., the corporation did no g Trust Fund Contribution ().	ot receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () MERITT, CHRIS 902 HOLLYSHO LUTZ, FL 3354	DRE DR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VD (X BISHOP, CHRI 8586 CHANNEI TAMPA, FL 33	_ VIEW CIR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VPT () MERITT, KARE 902 HOLLYSHO LUTZ, FL 3354	DRE DR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	VP ()) Delete ES	Title: Name:	() Change () Addition	

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.

Address:

City-St-Zip:

SIGNATURE: KAREN MERITT VPT 05/03/2004