2007 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

SIGNATURE:

Mar 20, 2007 8:00 am Secretary of State DOCUMENT # P95000665510 1. Entity Name 03-20-2007 90135 001 *****8.75 KERRIGAN TILE & MARBLE, INC. 03-20-2007 90135 002 ***150.00 Principal Place of Business . Mailing Address 17441 STERLING LAKE DR 17441 STERLING LAKE DR FT. MYERS FL 33912 FT. MYERS FL 33912 2. Principal Place of Business - No P.O. Box # 3. Mailing Address 3527 Wind River Run 3527 Wind River Run Suite, Apt. #, etc. Suite, Apt. #. etc 1st MOORE CR2E034 (10/06) lermon lermon City & State 4. FEI Number City & State Applied For 65-0602107 Not Applicable Country Country Zip \$8.75 Additional 5. Cortificate of Status Desired . S. a. <u> 459</u> Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Srendon KERIGAN, BRENDON Street Address (P.O. Box Number is Not Acceptable) 17441 STERLING LAKE DRIVE FT. MYERS FL 33912 City rmon 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. Brendon (NOTE, Rugistered Agent signature required FILE NOW!!! FEE IS \$150,00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE Delete TITLE Change ☐ Addition gan, Brendon KERIGAN, BRENDON NAM wind River Run 17441 STERLING LAKE DRIVE STREET ADDRESS STREET ADORESS FORT MYERS FL 33912 CITY-ST-ZIP CITY - ST - ZIP 34711 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-70P CITY - ST- ZIP TITLE ☐ Delete THE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADORESS CHY-SI-Zir ਅਜੇਵਨਾ-ਗੋਵ TITLE ☐ Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIP ☐ Delete THE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY-ST-ZIP TITLE Addition ☐ Delete HILE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 eath; 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 attachmen with an appears, with all other like empowered.

FILED