

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 04, 2004 8:00 am
Secretary of State

02-04-2004 90074 011 ***158.75

DOCUMENT # P96000042201

1. Entity Name

BONITA CUSTOM TILE, INC.



Principal Place of Business

28220 OLD 41 RD
#401
BONITA SPRINGS FL 34135
US

Mailing Address

28220 OLD 41 RD
#401
BONITA SPRINGS FL 34135
US

2. Principal Place of Business

28220 OLD 41 RD

3. Mailing Address

28220 OLD 41 RD

Suite, Apt. #, etc.

401

Suite, Apt. #, etc.

401

City & State

BONITA SPRINGS, FL.

City & State

BONITA SPRINGS, FL

Zip

34135

Country

USA

Zip

34135

Country

USA

6. Name and Address of Current Registered Agent

LAGRASTA, SERGIO
27810 VILLAGE DR. #16
BONITA SPRINGS FL 34135

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE P ☐ Delete
NAME LAGRASTA, SERGIO
STREET ADDRESS 28220 OLD 41 RD #401
CITY-ST-ZIP BONITA SPRINGS FL 34135

TITLE VPT ☐ Delete
NAME LAGRASTA, ALICIA
STREET ADDRESS 28220 OLD 41 RD #401
CITY-ST-ZIP BONITA SPRINGS FL 34135

TITLE T ☒ Delete
NAME LAGRASTA, SERGIO J
STREET ADDRESS 28220 OLD 41 RD #401
CITY-ST-ZIP BONITA SPRINGS FL 34135

TITLE S ☐ Delete
NAME LAGRASTA, ALICIA
STREET ADDRESS 28220 OLD 41 RD #401
CITY-ST-ZIP BONITA SPRINGS FL 34135

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME LA-GRASTA, ALICIA
STREET ADDRESS 28220 OLD 41 RD #401
CITY-ST-ZIP BONITA SPRINGS, FL. 34135

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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:

Sergio J. Lagrasta V.P.T.S.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-28-04

Date

239-947-4399

Daytime Phone #