



03-17-2003 90659 043 ***150.00

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P96000098161 1. Entity Name K.C. TILES & MARBLE, INC.																	
Principal Place of Business 28741 SOUTH CARGO COURT, UNIT #2 BONITA SPRINGS, FL 34135		Mailing Address 28741 SOUTH CARGO COURT, UNIT #2 BONITA SPRINGS, FL 34135															
2. Principal Place of Business <i>3900 Arnold Ave</i> <small>Suite, Apt. #, etc.</small> <i>Naples, FL</i> <small>City & State</small>	3. Mailing Address <i>3900 Arnold Ave.</i> <small>Suite, Apt. #, etc.</small> <i>Naples, FL</i> <small>City & State</small>	 <input checked="" type="checkbox"/> CHECK HERE IF MAKING CHANGES															
Zip <i>34104.</i> Country	Zip <i>34104.</i> Country	4. FEI Number 65-0712052 Applied For Not Applicable															
5. Name and Address of Current Registered Agent DORESTE, GUMELL 276 1ST STREET SW NAPLES, FL 34117		6. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required															
7. Name and Address of New Registered Agent Name <i>Mario Rodriguez</i> <small>Street Address (P.O. Box Number is Not Acceptable)</small> <i>3799 White Blvd</i> <i>Naples, FL</i> <small>City</small> FL <i>34117.</i>																	
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: <i>Mario Rodriguez.</i> DATE: <i>3/14/03</i> <small>Signature, typed or printed name of registered agent and date if applicable. (NOTE: Registered Agent's address required when changing.)</small>																	
9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11															
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), 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: <i>[Signature]</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		(239) 253-0359 <small>Default Phone #</small>															

CRF0304 (10/02)