

2004 FOR PROFIT CORPORATION ANNUAL REPORT

07-26-2004 90013 027 ***150.00
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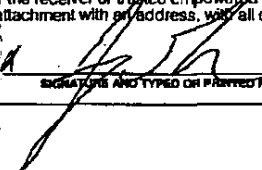
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SECRETARY OF STATE
DIVISION OF CORPORATIONS

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03192004 Chg-P CR2E034 (10/03)

DOCUMENT # P97000026969					
1. Entity Name J.A.G. TILE & MARBLE, INC.					
Principal Place of Business 6200 SHIRLEY STREET #205 NAPLES, FL 34109			Mailing Address 6200 SHIRLEY STREET #205 NAPLES, FL 34109		
2. Principal Place of Business 1479 RAIL HEAD BLVD			3. Mailing Address 1479 RAIL HEAD BLVD		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State NAPLES FL			City & State NAPLES FL		
Zip 34110	Country COLLIER	Zip 34110	Country COLLIER	4. FEI Number 59-3436787	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent GUERRA, RAUL E 731 22ND ST SE NAPLES, FL 34117			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 recasting) DATE _____					
FILE NOW!! FEE IS \$150.00 After May 1, 2004 Fee will be \$350.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GUERRA, JANATHAN 731 22ND ST SE NAPLES, FL 34117 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S/T GUERRA, RAUL E 731 22ND ST SE NAPLES, FL 34117 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
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, was all other like empowered.					
SIGNATURE: 			4-19-04 239.590.0570 BOERO		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR JONATHAN GUERRA			Date Daytime Phone #		

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