

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000067157

FILED
Mar 09, 2009
Secretary of State

Entity Name: ASSOCIATES TILE MANUFACTURER, CORP.

Current Principal Place of Business:

10651 NW 132 ST
BAY #3
HIALEAH GARDENS, FL 33018

New Principal Place of Business:

13510 N.W. 107 AVENUE
HIALEAH GARDENS, FL 33018

Current Mailing Address:

10651 NW 132 ST
BAY #3
HIALEAH GARDENS, FL 33018

New Mailing Address:

13510 N.W. 107 AVENUE
HIALEAH GARDENS, FL 33018

FEI Number: 65-0775958

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JIMENEZ, DOMINGO
215 W. 60 STREET
HIALEAH, FL 33012 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: JIMENEZ, DOMINGO
Address: 215 W. 60 STREET
City-St-Zip: HIALEAH, FL 33012

Title: VPS () Delete
Name: JIMENEZ, DORA
Address: 12869 SW 24 STREET
City-St-Zip: MIRAMAR, FL 33027

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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.

SIGNATURE: DOMINGO JIMENEZ

D

03/09/2009

Electronic Signature of Signing Officer or Director

Date