

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 22, 2008 08:00 AM
Secretary of State

DOCUMENT # P99000048957

1. Entity Name
RICHARD TREMBLAY CERAMIC TILE, INC.



Principal Place of Business
**2326 NW GARVIN AVE
ARCADIA, FL 34266-5215**

Mailing Address
**2326 NW GARVIN AVE
ARCADIA, FL 34266-5215**



04152008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0923575	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**KING, CLIFFORD M
2033 MAIN ST.
SUITE 303
SARASOTA, FL 34237**

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

U00000914735
05/08/08-80068-010 150.00

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	TREMBLAY, RICHARD
STREET ADDRESS	2326 NW GARVIN AVE
CITY-ST-ZIP	ARCADIA, FL 342665215
TITLE	VTS
NAME	TREMBLAY, ELAINE
STREET ADDRESS	2326 NW GARVIN AVE
CITY-ST-ZIP	ARCADIA, FL 342665215
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Elaine G. Tremblay Vice President 4-16-08 (941)952-9602
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #