

**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 06, 2007 08:00 A**  
**Secretary of State**

DOCUMENT # P99000109888

1. Entity Name

THE TILE MARKET OF ST. PETERSBURG, INC.



Principal Place of Business

2460 22ND AVE N  
ST PETERSBURG, FL 33713

Mailing Address

2460 22ND AVE N  
ST PETERSBURG, FL 33713



01162007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number

65-0969680

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

HAGEN, MAX M ESQ  
3531 GRIFFIN ROAD  
FT. LAUDERDALE, FL 33312

**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

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, 2007 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

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

10. OFFICERS AND DIRECTORS

TITLE P  
NAME ESQUENAZI, ROBERTO  
STREET ADDRESS 12141 NE 11TH ST  
CITY-ST-ZIP PLANTATION, FL 33323

TITLE VP  
NAME SILVERBERG, ROBERT A  
STREET ADDRESS 2460 22ND AVE N  
CITY-ST-ZIP ST PETERSBURG, FL 33713

TITLE S  
NAME ESQUENAZI, CAROL  
STREET ADDRESS 12141 NE 11TH ST  
CITY-ST-ZIP FORT LAUDERDALE, FL 33323

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

U00000693231  
04/16/07-80031-015 150.00

**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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ROBERT A SILVERBERG

4/16/07

727-322-2634

Date

Daytime Phone #