2007 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # S13679

1. Entity Name
ACCURATE TILE INSTALLERS, INC.

Principal Place of Business	Mailing Address
2148 NW 17 ST.	2148 NW 17 ST.
POMPANO BEACH, FL 33069 US	POMPANO BEACH, FL 33069 US

40000216

01042007   No Chg-P   CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number — Applied For-
65-0236569   Not Applicable

5. Certificate of Status Desired   **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

CORBY, JAMES E SR
2148 NW 17TH STREET
POMPANO BEACH, FL 33069

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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	CORBY, JAMES E.
STREET ADDRESS	2148 NW 17 ST.
CITY-ST-ZIP	POMPANO BEACH, FL 33069

TITLE	
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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: _JAMES E. Corby Pres._   1/5/07   954-971-4440

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #