2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V00854

Apr 21, 2004
Secretary of State

Entity Name: MASTER TILE OF LEE COUNTY, INC.

Current Principal Place of Business: New Principal Place of Business:

2223 NE 1ST TERRACE 1110 SE 4TH TERRACE

CAPE CORAL, FL 33909 US CAPE CORAL, FL 33990 US

Current Mailing Address: New Mailing Address:

2223 NE 1ST TERRACE
CAPE CORAL, FL 33909 US

1110 SE 4TH TERRACE
CAPE CORAL, FL 33990 US

FEI Number: 65-0302549 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

KORB, LEE W
2223 NE 1ST TERRACE
KORB, LEE W
1110 SE 4TH TERRACE

2223 NE 1ST TERRACE 1110 SE 4TH TERRACE CAPE CORAL, FL 33990 US CAPE CORAL, FL 33990 US

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: 04/21/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP () Delete Title: DP (X) Change () Addition

 Name:
 KORB, LEE W.,
 Name:
 KORB, LEE W

 Address:
 2223 NE 1ST TERRACE
 Address:
 1110 SE 4TH TERRACE

 City-St-Zip:
 CAPE CORAL, FL 33909
 City-St-Zip:
 CAPE CORAL, FL 33990

Title: S () Delete Title: S (X) Change () Addition

 Name:
 KORB, PAMELA J
 Name:
 KORB, PAMELA J

 Address:
 2223 NE 1ST TERRACE
 Address:
 1110 SE 4TH TERRACE

 City-St-Zip:
 CAPE CORAL, FL 33909
 City-St-Zip:
 CAPE CORAL, FL 33990

I hereby certify that the information supplied with this filing does not qualify for the 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 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: PAMELA J. KORB S 04/21/2004