
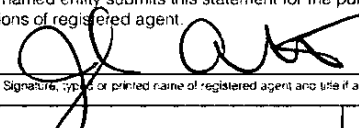
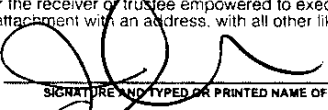


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2008 8:00 am
Secretary of State

04-14-2008 90053 001 ***150.00

DOCUMENT # V32170 1. Entity Name STONE & TILE SUPPLY, INC.					
Principal Place of Business 1500 UNIVERSITY DRIVE 105 CORAL SPRINGS, FL 33071 US			Mailing Address 1500 UNIVERSITY DRIVE 105 CORAL SPRINGS, FL 33071 US		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 65-0332287	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent STYLES, MICHAEL J. 888 S. ANDREWS AVE. S-301 FT LAUDERDALE, FL 33316			7. Name and Address of New Registered Agent Name ATTENASIO JOSEPH Street Address (P.O. Box Number is Not Acceptable) 1500 N. UNIVERSITY DR. SUITE 105 City CORAL SPRINGS FL 33071		
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 		JOSEPH ATTENASIO President		DATE 04/09/08	
FILE NOW!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ATTENASIO, JOSEPH 10419 NW 48TH MANOR CORAL SPRINGS, FL	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP ATTENASIO, DEBORAH 10419 NW 48TH MANOR CORAL SPRINGS, FL	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete				
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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: 		JOSEPH ATTENASIO, Pres		DATE 04/09/08 (954)344-8600	

40068250



04092008 Chg-P CR2E034 (12/06)

Applied For
Not Applicable

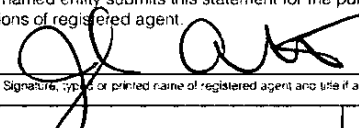
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name
ATTENASIO JOSEPH
Street Address (P.O. Box Number is Not Acceptable)
1500 N. UNIVERSITY DR.
SUITE 105
City
CORAL SPRINGS **FL** **33071**

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SIGNATURE  **JOSEPH ATTENASIO** President **04/09/08**

(NOTE: Registered Agent signature required when reinstating)

DATE

9. Election Campaign Financing
Trust Fund Contribution. ☐

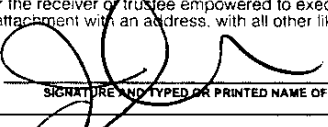
\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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SIGNATURE:  **JOSEPH ATTENASIO, Pres** **04/09/08** (954)344-8600

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # **X12**