

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **577367** (6)

1. Corporation Name
DECORATIVE TILES, INC.



Principal Place of Business
**3500 NW 77TH COURT
MIAMI FL 33122**

Mailing Address
**3500 NW 77TH COURT
MIAMI FL 33122**

2. Principal Place of Business		2a. Mailing Address	
21 State, Apt. #, etc.	26 State, Apt. #, etc.	27 City & State	28 Zip
22 City & State	27 City & State	29 Zip	30 Country
23 Zip	28 City & State	29 Zip	30 Country
24 Country	29 Zip	30 Country	

3. Date Incorporated or Qualified 06/28/1978	3a. Date of Last Report 05/01/1995
4. FEI Number 59-1845865	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032 Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**DEGENTILE, BERNARD
3500 NW 77 CT
MIAMI FL 33122**

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

11. Pursuant to the provisions of Sections 607.0802 and 607.1503, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (Print Name) _____ (Print Name)

12. OFFICERS AND DIRECTORS		
TITLE	ST DEGENTILE, HENRI-PIERRE	<input type="checkbox"/> DELETE
NAME	3500 NW 77 CT MIAMI FL	
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE	P DEGENTILE, BERNARD	<input type="checkbox"/> DELETE
NAME	3500 NW 77 CT MIAMI FL	
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
11 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME		
13 STREET ADDRESS		
14 CITY-STATE-ZIP		
21 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME		
23 STREET ADDRESS		
24 CITY-STATE-ZIP		
25 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
26 NAME		
27 STREET ADDRESS		
28 CITY-STATE-ZIP		
41 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME		
43 STREET ADDRESS		
44 CITY-STATE-ZIP		
51 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME		
53 STREET ADDRESS		
54 CITY-STATE-ZIP		
61 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME		
63 STREET ADDRESS		
64 CITY-STATE-ZIP		

14. I do hereby certify that the information supplied in this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 trustee or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Book 12 or Book 13 if change of control or appointment without business.

SIGNATURE: *Bernard de Puyb...*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-20-96 (305) 5731122

CRE034 (12/95)