

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

Apr 13 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P39444** (5)
1. Corporation Name
OLYMPIA TILE (USA), INC.



Principal Place of Business 2443 E. MEADO BLVD. TAMPA FL 33619 US	Mailing Address 701 BERKSHIRE LANE N. PLYMOUTH MN 55441 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 06/29/1992	
21 Suite, Apt. #, etc.	22 City & State	26 Suite, Apt. #, etc.	27 City & State	4. FEI Number 91-1116624	Applied For ☐ Not Applicable
23 Zip	25 Country	29 Zip	30 Country	5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
9. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324				10. Name and Address of New Registered Agent	
				81 Name	
				82 Street Address (P.O. Box Number is Not Acceptable)	
				83	
				84 City	FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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

Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P REICHMANN, RALPH ☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	1000 LAWRENCE AVE. WEST	1.2 NAME	
STREET ADDRESS	TORONTO, ONT., CANADA	1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	D TERNER, MARC ☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	1000 LAWRENCE AVE. WEST	2.2 NAME	
STREET ADDRESS	TORONTO ONT. CA	2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	TD BEAUPRE, TIMOTHY ☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	701 BERKSHIRE LANE N.	3.2 NAME	
STREET ADDRESS	PLYMOUTH MN	3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	D BENNETT, WM. SCOTT ☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	2443 E MEADOW BLVD	4.2 NAME	
STREET ADDRESS	TAMPA FL	4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	D GESTETNER, LEWIS ☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME	1000 LAWRENCE AVE. WEST	5.2 NAME	
STREET ADDRESS	TORONTO, ONT., CANADA	5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	D GOLDWATER, JEFFREY ☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME	1000 LAWRENCE AVE. N.	6.2 NAME	
STREET ADDRESS	TORONTO ON	6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *[Handwritten Signature]* **JEFFREY GOLDWATER** **4-22-98** **11:05 AM**

CR2E034 (10/97)