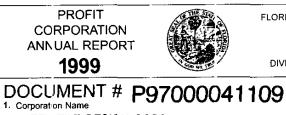
FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999

UNEEK TILE DESIGN CORP.



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90255 015 ***150.00



Principal Place of Business Mailing Address						311 - E1001 - 11041 - 11031 - 1	
1408 SE 36TH TERR CAPE CORAL FL 33904		1408 SE 36TH TERR CAPE CORAL FL 33904			DO NOT WRITE IN T	HI3 SPACE	
					3. Date Incorporated or Qualifed 04/30/1997		
2. Principal Place of Business 2a. Mailing Addres					4. FEI Number	Applied For	
2. Finicipal Flace of Edulinoss		26		65-0747963	Not Applicable		
Suite, Apt.	# etc	Suite, Apt. #, etc.				\$8.75 A	
2	_	27			5. Certificate of Status Desired	Fee Re	
City & State		City & State			6. Electior Campaign Financing \$5.00 Nay Be		Nay Be
23		28			Trust Fund Contribution	Added to	o Fees
Zip	Country	Zìp	Cou	intry	8. This corporation owes the current year	Intangible	.c4
24	25	29	30	, -	Personal Property Tax.		K[No
	9. Name and Address of Curre	ent Registered Agent		81 Name	10. Name and Address of New Register	ed Agent	
EDE	S, IVONNE				YEPES. INONN	•	
	S SE 36TH TERR			82 Street Ad I	ess (P.O. Box Number is Not Acceptable)		
	E CORAL FL 33904			83			
				84 City		85 Zip C	Code
44 Disease at	to the provisions of Continue 607.00	02 and 607 1509 Florida Statu	roe the a	bove named co.in	oration submit; this statement for the purpose	of changing its	registered
office or r	registered agent, or both, in the Stati m familiar with, and accept the oblig	e of Florida. Such change was :	a uthorized	d by the corporation	on's board of directors. I hereby accept the ap	p sintment as rec	gistered
SIGNATURE							
	Signature, typed or printed hai he of registered a	· · · · · · · · · · · · · · · · · · ·		Agent signature require			E E IN 12
12.	, <u> </u>	NE DIRECTORS	13.		ADDITIC NS/CHANGES TO OFFICERS	Change	Addition
TITLE	D VEDES WONNE	☐ DELETE	11TI			onlange	
NAME	YEPES, IVONNE 1408 SE 36TH TERR		1.2 N				1
STREET ADDRE SS	1		1	TREET ADDRESS			
CITY- ST- ZIP	CAPE CORAL FL 33904	DELETE	1.4 C	ITY-ST-ZIP		Change	Addition
TITLE	D VEDEC OCCAD A	Docere	22 N				
NAME	YEPES, OSCAR A 1408 SE 36TH TERR		8	TREET ADDRESS			
STREET ADDRE 3S	CAPE CORAL FL 33904		•	CITY-ST-ZIP			
CITY-ST-ZIP TITLE	CAPE CONALTE 33907	☐ DELETE	3.1 Ti			Change	Addition
NAME			3.2 N				
STREET ADDRE 3S				TREET ADDRESS			
CITY-ST-ZIP			3.4. C	CITY-ST-ZIP			
TITLE		☐ DELETE	4.1 TI			Change	Addition
NAME			4.21	NAME			
STREET ADDRESS			438	TREET ADDRESS			
CITY-ST-ZIP			4.4 C	ITY-ST-ZIP		<u> </u>	
TITLE		☐ DELETÉ	5.1 TI	1		Change	Addition
NAME			5.2 N	ŀ			1
STREET ADDRESS			•	TREET ADDRESS			
CITY-ST-ZIP				ITY-ST-ZIP			- FILATURE
TITLE		☐ DELETE	6.1 T			Change	Addition
NAME			6.2 N				
STREET ADDRESS				TREET ADDRESS			
0.007 07 710	1		6.4 C	ITY-ST-ZIP			ı

14. I herety certify that the informa ion supplied with this filing does not qualify for the exemption stated in Section 119.0; (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 13 if changes, or on an attachment with an address, with all other like empowered.

CR2E034 (11/98)