

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

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra D. Morrison
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAY -1 AM 12:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # H12955 (1)

1. Corporation Name
DELUCA TILE INC.

DO NOT WRITE IN THIS SPACE.

Principal Place of Business: **1126 NORTH ATLANTIC DRIVE LANTANA FL 33462**
Mailing Address: **1126 NORTH ATLANTIC DRIVE LANTANA FL 33462**

2. Principal Place of Business: **21**
2a. Mailing Address: **26**
Suite, Apt. #, etc.: **22**
City & State: **23**
Zip: **24** Country: **25** Zip: **29** Country: **30**

3. Date incorporated or Qualified: **08/01/1984** 3a. Date of Last Report: **04/28/1994**
4. FEI Number: **NOT APPLICABLE** Applied For: Not Applicable:
5. Certificate of Status Desired: **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**
8. This corporation has liability for intangible tax under S. 100.022, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent: **DELUCA, OLINDO 1126 NORTH ATLANTIC DRIVE LANTANA FL 33462**
10. Name and Address of New Registered Agent:
B1 Name: _____
B2 Street Address (P.O. Box Number is Not Acceptable): _____
B3 _____
B4 City: _____ B5 Zip Code: **FL**

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: _____ DATE: _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when resigning)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DELUCA, OLINDO	1.2 NAME	
STREET ADDRESS	1126 NORTH ATLANTIC DR.	1.3 STREET ADDRESS	
CITY - ST - ZIP	LANTANA FL	1.4 CITY - ST - ZIP	
TITLE	D	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DELUCA, GLADYS	2.2 NAME	
STREET ADDRESS	1126 NORTH ATLANTIC DR.	2.3 STREET ADDRESS	
CITY - ST - ZIP	LANTANA FL	2.4 CITY - ST - ZIP	
TITLE	T	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DELUCA, STEVEN	3.2 NAME	
STREET ADDRESS	7215 150TH CT N	3.3 STREET ADDRESS	
CITY - ST - ZIP	PALM BCH GRNS FL	3.4 CITY - ST - ZIP	
TITLE	V	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DELUCA, KENNETH	4.2 NAME	
STREET ADDRESS	1126 N ATLANTIC DR	4.3 STREET ADDRESS	
CITY - ST - ZIP	LANTANA FL	4.4 CITY - ST - ZIP	
TITLE	V	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FIDLER, FRANK	5.2 NAME	
STREET ADDRESS	1126 N ATLANTIC DR	5.3 STREET ADDRESS	
CITY - ST - ZIP	LANTANA FL	5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(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 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: *Steven A. D. L...* DATE: **4/26/95** 1-407-515-3877
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR