

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JAN 26 PM 4:36

DOCUMENT # P92000011899 (1)

1. Corporation Name

LA MANCHA TILES, INC.

Principal Place of Business

8000 GOVERNOR SQUARE BLVD.
SUITE 410
MIAMI LAKES FL 33016
US

Mailing Address

8000 GOVERNOR SQUARE BLVD.
SUITE 410
MIAMI LAKES FL 33016
US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

12/11/1992

3a. Date of Last Report

11/18/1994

4. FEI Number

65-0377093

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. 190.032,
Florida Statutes

☐ Yes ☐ No

2. Principal Place of Business

21

2a. Mailing Address

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23

City & State

27

Zip

24

Country

25

Zip

29

Country

30

9. Name and Address of Current Registered Agent

TUTAN, G V
2900 MIDDLE STREET
MIAMI FL 33133

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 provisions of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, Print or printed name of registered agent and fee (if applicable)

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE

D

NAME

O'HARA, DENNIS M.

STREET ADDRESS

180 CRANDON BLVD., STE 115

CITY - ST - ZIP

KEY BISCAYNE FL

TITLE

D

NAME

GODINEZ, ANTONIO D.

STREET ADDRESS

180 CRANDON BLVD., STE. 115

CITY - ST - ZIP

KEY BISCAYNE FL

TITLE

D

NAME

FERNANDEZ, LUIS J.

STREET ADDRESS

180 CRANDON BLVD., STE 115

CITY - ST - ZIP

KEY BISCAYNE FL

TITLE

D

NAME

LOWERY, DAVID J.

STREET ADDRESS

180 CRANDON BLVD., STE. 115

CITY - ST - ZIP

KEY BISCAYNE FL

TITLE

D

NAME

LOWERY, DAVID J.

STREET ADDRESS

180 CRANDON BLVD., STE. 115

CITY - ST - ZIP

KEY BISCAYNE FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

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 included 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 in an attachment with an address.

SIGNATURE:

SIGNATURE AND PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

(Signature Printed Name)