

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **H12955** (1)

1. Corporation Name
DELUCA TILE INC.



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

3. Date Incorporated or Qualified: **08/01/1984**
3a. Date of Last Report: **05/01/1995**
4. FEI Number: **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 199.032, Florida Statutes: Yes No

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

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

81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83.
84. City
85. 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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	DELUCA, OLINDO	
STREET ADDRESS	1126 NORTH ATLANTIC DR.	
CITY - ST - ZIP	LANTANA FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	DELUCA, GLADYS	
STREET ADDRESS	1126 NORTH ATLANTIC DR.	
CITY - ST - ZIP	LANTANA FL	
TITLE	T	<input type="checkbox"/> DELETE
NAME	DELUCA, STEVEN	
STREET ADDRESS	7215 159TH CT N	
CITY - ST - ZIP	PALM BCH GRDNS FL	
TITLE	V	<input type="checkbox"/> DELETE
NAME	DELUCA, KENNETH	
STREET ADDRESS	1126 N ATLANTIC DR	
CITY - ST - ZIP	LANTANA FL	
TITLE	V	<input checked="" type="checkbox"/> DELETE
NAME	FIDLER, FRANK	
STREET ADDRESS	1126 N ATLANTIC DR	
CITY - ST - ZIP	LANTANA FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	Vice President
6.3 STREET ADDRESS	John Wilkeson
6.4 CITY - ST - ZIP	1126 North Atlantic Dr Lantana FL 33462

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 199.07(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 R. DE LUCA** Date: **7/17/96**

CR2E034 (12/95)