

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# H12955

**FILED  
Apr 13, 2015  
Secretary of State  
CC1802780809**

**Entity Name:** DELUCA TILE INC.

**Current Principal Place of Business:**

7215 159TH. CT. N.  
PALM BEACH GARDENS, FL 33418

**Current Mailing Address:**

7215 159TH. CT. N.  
PALM BEACH GARDENS, FL 33418

**FEI Number:** 59-1783704

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

DELUCA, OLINDO  
7215 159TH. CT. N.  
PALM BEACH GARDENS, FL 33418 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PD  
Name DELUCA, OLINDO  
Address 7215 159TH. CT. N.  
City-State-Zip: PALM BEACH GARDENS FL 33418

Title D  
Name DELUCA, GLADYS  
Address 7215 159TH. CT. N.  
City-State-Zip: PALM BEACH GARDENS FL 33418

Title T  
Name DELUCA, STEVEN  
Address 7215 159TH CT N  
City-State-Zip: PALM BCH GRDNS FL 33418

Title V  
Name DELUCA, KENNETH  
Address 7215 159TH CT N  
City-State-Zip: PALM BCH GRDNS FL 33418

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** STEVEN R DELUCA

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04/13/2015

Electronic Signature of Signing Officer/Director Detail

Date