

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

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # **209611** (3)

1. Corporation Name
G & M TERRAZZO CO.

Principal Place of Business
**1858 NW 21 ST
POMPANO BCH FL 33069
US**

Mailing Address
**1858 NW 21 ST
POMPANO BCH FL 33069
US**

FILED
Jan 21 1998 8:00am
Secretary of State



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/05/1958

4. FEI Number

59-0797360

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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**PAUL, MARY LOU
1858 NW 21 ST
POMPANO BCH FL 33069**

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 obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME **DVS**

STREET ADDRESS **PAUL, MARY LOU**

CITY - ST - ZIP **744 VIA GENOVA**

DEERFIELD BCH FL

TITLE ☐ DELETE

NAME **D**

STREET ADDRESS **PAUL, TERRANCE**

CITY - ST - ZIP **5790 HARBORAGE DR**

FT. MYERS FL

TITLE ☐ DELETE

NAME **PD**

STREET ADDRESS **PAUL, DENNIS**

CITY - ST - ZIP **744 VIA GENOVA**

DEERFIELD BCH FL

TITLE ☐ DELETE

NAME **VD**

STREET ADDRESS **PAUL, HARRY**

CITY - ST - ZIP **4714 HOLLYW DR**

TAMARAC, FL 00000

TITLE ☐ DELETE

NAME **D**

STREET ADDRESS **PAUL, TIMOTHY**

CITY - ST - ZIP **5778 ELIZABETH ANN WAY**

FORT MYERS FL

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☒ Change ☐ Addition

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

5278 Boca Marina Circle South

Boca Raton, FL 33487

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

☐ Change ☐ Addition

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

☒ Change ☐ Addition

5278 Boca Marina Circle South

Boca Raton, FL 33487

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

☐ Change ☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

☐ Change ☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: *Mary Lou Paul* **PAUL**

1-9-98

Date

Daytime Phone #

Office

CR2E034 (10/97)