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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

Principal Place of Business

SIGNATURE:

416512

(2)

**DOCUMENT #** 

**RICATE TILE CORPORATION** 

Mailing Address

ONE AND TYPED ON PHINTED NAME OF SIGNING OFFICER ON DIRECTOR

1261 WYNDCLIFF DR

P.O. BOX 15946

**FILED** May 01, 1996 08:00 AM **Secretary of State** 



WEST PALM BEACH FL 33414 US		WEST PALM BCH. FL 33416								
03					3. Date in 01	corporated or /10/1973	Qualified	3a. Date of Las 04/26	t Report 5/1995	
2. Principal Pla	ce of Business 254 E. EPSON DR 20	ta. Mailing Address			4. FEI Nur	mber 59-1429875				ed For
Suite, Apt, #		Suite, Apt. #, etc.						<u> </u>	.75 Add	Applicable
22	27	-1			5. Certifica	ate of Status [	esired	1 1 " "	ee Requ	
City & State		City & State			6. Election	n Campaign Fi	nancing	\$5	.00 Ma	av Be
23 LOXA H	ATCHEE FL 21	3			Trust F	und Contributi	on	3 1 '	dded to F	•
Zip	Country	Zip	Country			•		langible tax unde	ers 199.	.032
24 334	70  25   29		30			Statutes	Yes Yes	_		<del></del>
	9. Name and Address of Current Reg	pstered Agent	81	Name			of New He	gistered Agent		
4004 N	IZZO GIULLO PRINDCLIRE DR C. 1.1	-100 at	82		SCAVU ddress (P.O. Box	<b>Z.ZO</b> Number is Not	Acceptable	SOM D	e e	
WEST	PALM-BEACHLEL 33414	200	83		1655	7	C	30 m O.	<u>/_</u>	
	PALMABEACHEL 33414	no as	<b></b>					· · · · · · · · · · · · · · · · · · ·		
	1,50	1000	84	City L	DXA HAT	CHER		FL  85	Zip Coo	je アクノ
11. Pursuant to	the provisions of Sections 607,0502 and	607.1508, Florida Statutes	s, the above n	amed con	poration submits t	this statement	for the purp	ose of changing	its registe	ered office
or registere familiar with	d agent, or both, in the State of Florida. S. n, and accept the obligations of, Section 60	ich change was authorize 17.0505, Florida Statutes.	d by the corpo	oration's b	oard of directors.	I hereby acce	ot the appoi	ntment as registe	ered ager	nt. I am
SIGNATURE										
	lignature, typed or printed name of registered agent and title			t signature req	uired when reinstating)			DATE		***************************************
12.	OFFICERS AND DIR		13.	г-	ADDITIO	ONS/CHANGE	S TO OFFIC	ERS AND DIREC		
TITLE	SCAVUZZO, GIULIO	☐ DELETE	1. 1 TITLE		_			Char	ige [_]	Addition
NAME	1261 WYNDCLIFF DR		1.2 NAME	٤	SCAVUZI	LO 61	0216	^		
STREET ADDRESS	WEST PALM BEACH FL		1.3 STREET	ADDRESS	16354 LOXAH	C. EP	50M D	22/	<b>)</b>	
CITY-ST-ZIP TITLE	S	F'] DECETE	1.4 CrTY - S	T-ZIP	COVAH	KTCHET	5 FC		~	Addition
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CITY-ST-2IP	WELLINGTONLEL		2.4 C/TY-S		· ·	• •				
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NAME		_	3.2 NAME	ŀ					٠ ــــ	
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NAME			4.2 NAME							
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CITY-ST-ZIF			54 CITY - S	T-ZI2				-	<u></u>	
TITLE		DELETE	6 1 TITLE					Char	ige 📋	Addition
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STREET ADDRESS			63 STHEET							
City-St-ZIP	cortify that the information emplied with the	on filing in unbertails form	64 CITY - S		furfaction access	on alcted :- ^	ntion 340 o	7/0\0.1 F14-1- O	al.dec.	f. million
certify that oath: that I	certify that the information supplied with It the information indicated on this annual re- am an officer or director of the corporation Block 12 or Block 13 if changed, or or or	ort or supplemental annu	al report is tru ennowered t	e and acc	urate and that my	/ signature sha	II have the s	ame legal effect	as if mad	de under