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

PROFIT CORPORATION **ANNUAL REPORT**



Secretary of State DIVISION OF CORPORATIONS

1998 **DOCUMENT** #

(0)

C AND F CERAMICS WHOLESALE, INC.

FILED Apr 08 1998 8:00am Secretary of State



Principal Place of Business	Mailing Address	•	וא וופום נוום מפונו שופו ופופו שופום וופום וופום ו	RLI BIBSI OLDII OLDII OLDII ENDI
3241 EAST 11TH AVENUE 3241 EAST 11TH AVENU		E		
HIALEAH FL 33013	HIALEAH FL 33013		DO NOT WOITE IN THIS	DDAGE
			DO NOT WRITE IN THIS 3. Date Incorporated or Qualified	SPACE
			· ·	
2. Principal Place of Business	2a. Mailing Address		04/05/1974 4. FEI Number	
21	26			Applied For
Suite, Apt. #, etc.	Suite, Apt #, etc.		59-1428360	Not Applicable \$8.75 Additional
22	27		5. Certificate of Status Desired	Fee Required
City & State	City & State		6. Election Campaign Financing	
23	28		Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country	Zip	Country	8. This corporation owes or has paid the cur	
24 25	29 3	o		Yes No
9. Name and Address of Cu	rrent Registered Agent		10. Name and Address of New Registered	Agent
CREWS, CANDACE 81 Name				
-11949-9W-9-DDURT / 7.5	10 5.W.29 C	82 Street Add	dress (P.O. Box Number is Not Acceptable)	
PEMBROKE PINES FL 33025	MIRAMAR, FI	/ Street Add	oress (F.O. Box Number is Not Acceptable)	
		83		
	<i>3</i> 30 <i></i> 29	\ <u>-</u>		
		84 City	FL	85 Zip Code
11. Pursuant to the provisions of Sections 607.	0502 and 607.1508, Florida Statutes	. the above-named cor		changing its registered
office or registered agent, or both, in the S	tate of Florida, Such change was aut	thorized by the corpora	rporation submits this statement for the purpose of ation's board of directors. I hereby accept the app	ointment as registered
	angularis of excellent cortbodo, Floris	on characes.		
SIGNATURE Signature, typed or posted carrie of registerer	1 agreed and little if applicable [NOTE F	Registered Agent signature requ	uired when reinstating) DATE	
12. OFFICERS	AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12
TITLE VD	DELETE	1.1 TITLE		Change Addition
HAME TURNER, B.		1.2 NAME		
STREET ADDRESS RT 4, BOX 711 ACKER F	RD OB	1.3 STREET ADDRESS		
CITY-ST-ZIP DOVER FL		1.4 CITY - ST - ZIP		
TITLE PD	☐ DELETE	2.1 TITLE)	Change Addition
NAME CREWS, C.B.		2.2 NAME		
STREET ADDRESS 14343 EW U COURT /	7510 SW. 29 Ct	2.3 STREET ADDRESS		
	MIRAMAR F13300	9 4 CITY-ST-ZIP		
TITLE ST	DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME HIBBERT, F. N.		3.2 NAME		
STREET ADDRESS 15159 ENCINO CIRCLE I	N	3.3 STREET ADDRESS		
CITY-ST-ZIP PEMBROKE PINES FL		3.4. CITY-ST-ZIP		
TITLE	DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME		4.2 NAME		
STREET ADDRESS		4.3 STREET ADORESS		ŀ
CITY-SI-ZIP		4.4 CITY-ST-ZIP		Ì
TITLE	DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME		5.2 NAME		-
STREET ADDRESS		5.3 STREET ADDRESS		ł
CITY-ST-ZIP		54 CITY-ST-ZIP		
TITLE	DELETE	6.1 TITLE	**************************************	Change Addition
NAME	-	6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP				
	d with this files does not qualify for	6.4 CfTY-ST-ZiP	n Section 119.07(3)(i), Florida Statutes. I further ce	stift that the information