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

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 08 1998 8:00am Secretary of State

1. Corporation	TILE DISTRIBUTORS, INC.	9 (9)							
Principal Plac	ce of Business	Mailing Address					bil Bilkil (11)	II WIWII WIWII WIWII	(618 11 (63 1
3498 N. E. 12TH AVE.		3498 N. E. 12TH AVE.							
POST OFFICE		POST OFFICE BOX 2303				DO NOT WISH	T IN THE	COACE	
OAKLAND PA	IRK FL 33307	OAKLAND PARK FL 3330	7			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified			
						04/23/1974			
2. Principal F	Place of Business	2a. Mailing Address				4. FEI Number		Ac	optied For
21		26				l			t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	A	\$8.75	Additional
22		27				5. Certificate of Status Desired	7	Fee Re	equired
City & Stal	te	City & State	h			6. Election Campaign Financing \$5.00 May Be			
23		28	Zip Country			Trust Fund Contribution		Added 1	
Zip	Country Zip			ntry		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.			
24	25 9. Name and Address of Curren	29 Registered Agent	[30]			Personal Property Tax due June 30. Yas U No 10. Name and Address of New Registered Agent			
SII.	(ES,JR.,LEON R			81 Nam	0				
	B4 N.E. 12TH AVENUE			82 Stree	A Addres	no /D O. Doy N. Imphor in Not Assessed	hle)		
OAKLAND PARK FL 33307				51186	a Madie	ss (P.O. Box Number is Not Accepte	we)		
.				83					
				84 City		·····		85 Zip (Code
							FI	_ ' '	
11. Pursuant	to the provisions of Sections 607,050 registered agent, or both, in the State am familiar with, and accept the obligations.	2 and 607.1508, Florida Statut	es, the al	oove-name	d corpo	ration submits this statement for the	purpose	of changing it	s registered
agent. I a	am familiar with, and accept the obliga	ations of, Section 607.0505, F)	orida Stat	utes.	Jiporano	in a board of directors. Thereby acce	ppt tile ap	politiment as	registered
SIGNATURE									
12,	Signature, typod or printed name of registered agent and itselft applicable. (NOTE F OFFICERS AND DIRECTORS			d Agent signat	ure required	when reinstating) ADDITIONS/CHANGES TO OFF	DATE ICEDS AN	ID DIRECTOR	P IN 12
TITLE	P	DELETE	13.	TI F	TV		IOLIIO AI	Change	Addition
NAME	SIKES, LEON, JR.	1.2							
STREET ADDRESS	3498 NE 12TH AVE			reet addres	160	ZENBY, ERIC 01 N.W. 8210	WEOU	UF	
CITY-ST-ZIP	OAKLAND PK, FL 00000			TY - ST - ZIP	M	IAMIS FLO		'	
TITLE	†	DELETE	2.1 10		Ý	-		Change	Addition
NAME	MICHALOSKI, PAUL		2.2 N	2.2 NAME		MONTANA THOMA	5		
STREET ADDRESS	3498 NE 12TH AVE		2.3 \$1	REET ADDRES	s 42	5 Avon ROAD	1.		
CITY-ST-ZIP	OAKLAND PK, FL 00000		2.4 C	ITY-ST-ZIP	$-\omega_{l}$	MONTANA THOMA 5 AVON ROAD EST PAIM BEAC	4 F	2.	
TITLE	Y	DELETE	3.1 TI				,	Change	Addition
NAME	BRUCE, WILLIAM		3.2 NA		1				
STREET ADDRESS	425 AVON ROAD			REET ADDRES	S				
CITY-ST-ZIP	W PALM BCH, FL 00000	T DELETE		TY-ST-ZIP	 			Channe	Addition
TITLE NAME	SIKES, LEON R.,III	DELETE	4.1 TJ 4.2 N					Change	∟ Addition
STREET ADDRESS	791 MONTEREY RD.								
CITY-ST-ZIP	ATTION		- 1	4.3 STREET ADDRESS 4.4 CITY-ST-ZIP					
TITLE	V	DELETE	5.1 TI		+-			Change	Addition
NAME	FOLEY, JOHN	▼	5.2 N/						
STREET ADDRESS	4444 4441 44145 4144			5.3 STREET ADDRESS					
CITY-ST-ZIP	MIAMI FL			TY-ST-ZIP					
TITLE	V	DELETE	6.1 10					Change	Addition
NAME	CLARK, DAVID		6.2 NA	ME					
STREET ADDRESS	3484 NE 12 AVE		6.3 \$1	reet addres	s				
CITY-ST-ZIP	OAKLAND PARK FL			TY-ST-ZIP					ا ــــــــــــــــــــــــــــــــــــ
	certify that the information supplied w on this annual report or supplementa								

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 changes or on an altischment with an address