FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 **PROFIT** Mar 11 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B.-Mortharh ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 **DOCUMENT # 456839** D & S CERAMIC TILERS, INC. Principal Place of Business Mailing Address 1425 GOLFVIEW DRIVE 1425 GOLFVIEW DRIVE P O BOX 1042 P O BOX 1042 DO NOT WRITE IN THIS SPACE TITUSVILLE FL 32781-8042 TITUSVILLE FL 32781-8042 3. Date Incorporated or Qualified 07/15/1974 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 2880 S. HOPKINS Suite, Apt. #, etc. 26 P.O. BOX 59-1586675 Not Applicable Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Election Campaign Financing \$5.00 May Be 23 TITUSVILLE TITUSVILL Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year Intangible Yes Personal Property Tax due June 30. 10. Name and Address of New Registered Agent HAMMONDS, DARRELL S 1425 GOLFVIEW DRIVE ess (P.O. Box Number is Not Acceptable TITUSVILLE FL 32780 PARWOOD 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 objections of, Section 607.0505, Florida Statutes. Sec WHYTE OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE TITLE Change HAMMONDS, DABRELL S NAME 1.2 NAME SAMUGA ADAMS 1425 GODINEW DRIVE STREET ADDRESS 1.3 STREET ADDRESS TITUSVILLE, FL 00000 VERO BEACH CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE 2.1 TITLE Addition TITLE VICE PRESIDENT HAMMONDS, SHIFTLEY P NAME 2.2 NAME GLENN WHITLOCK 1425 DOLFVIEW DRIVE STREET ADDRESS 2.3 STREET ADDRESS NOS E. MELBOURNE TAPUSVILLE, FL 00000 FL- 32901 CITY-ST-ZIP 2. 4 CITY - ST- ZIP DELETE Change **Addition** TITLE 3 1 TITLE TREASURBE 3 2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3 4. CITY - ST- ZIP

14. Horeby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). 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.

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