PROFIT CORPORATION ANNUAL REPORT <b>1999</b>		FLORIDA DEPART Kathering Secretary DIVISION OF CC	Harris	FILED Feb 27, 1999 8:00 Secretary of Sta 02-27-1999 90090 012 ***150.	ite
OCUMENT # 629 Corporation Name ITAL THREE TILES, INC.	9484				
ncipal Place of Business ) NW 41ST ST #B MI FL 33166	P O Hial US	ing Address BOX 127119 EAH FL 33012		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 06/18/1979	
Principal Place of Business	2a.     26	Mailing Address		1 <sup>4</sup>	plied For t Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired Fee Re	
City & State	27	City & State	<u></u>	6. Election Campaign Financing \$5.00	May Be
Zip Country	28	Zip	Country	Trust Fund Contribution Added t 8. This corporation owes the current year Intangible	o Fees
25	29	3	0	Personal Property Tax. Yes	
9. Name and Addres	s of Current Registe	ered Agent	81 Name	10. Name and Address of New Registered Agent	
MIAMI FL 33130			83		
Pursuant to the provisions of Section office or registered agent, or both, agent. I arn familiar with, and accept	ons 607.0502 and 60 in the State of Florida pt the obligations of, \$	7.1508, Florida Statutes . Such change was aut Section 607.0505, Florid	84 City the above-named corr porized by the corporati a Statutes.	poration submits this statement for the purpose of changing its ion's board of directors. I hereby accept the appointment as reg	
Pursuant to the provisions of Section office or registered agent, or both, agent. I am familiar with, and acception SNATURE Signature, typed or printed name of Signature, typ	pt the obligations of, t	Section 607.0505, Flond	, the above-named corr norized by the corporati	FL poration submits this statement for the purpose of changing its ion's board of directors. I hereby accept the appointment as reg	
Agent. I am familiar with, and accept GNATURE Signature, typed or printed name of OF	pt the obligations of, t	applicable. (NOTE: R	the above-named corporation orized by the corporation a Statutes. agistered Agent signature require 13.	PL poration submits this statement for the purpose of changing its ion's board of directors. I hereby accept the appointment as re- ad when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTO	registered gistered
agent. I am familiar with, and accept GNATURE	pt the obligations of, s	applicable. (NOTE: R	the above-named corr norized by the corporati a Statutes.	Poration submits this statement for the purpose of changing its ion's board of directors. I hereby accept the appointment as regard when reinstating) DATE	registered gistered RS IN 12
Agent. I am familiar with, and accept SNATURE Signature, typed or printed name of OF E PD MAYANI, B.T. EET ADDRESS 300 ROBERTS BLDC	pt the obligations of, s	applicable. (NOTE: R	the above-named corporation orized by the corporation a Statutes.	PL poration submits this statement for the purpose of changing its ion's board of directors. I hereby accept the appointment as re- ad when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTO	registered gistered RS IN 12
Agent. I am familiar with, and accept SNATURE Signature, typed or printed name of OF E PD MAYANI, B.T. EET ADDRESS -ST-ZIP MIAMI FL	pt the obligations of, s	applicable. (NOTE: R TORS	the above-named corror orized by the corporati a Statutes. asistered Agent signature require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	PL poration submits this statement for the purpose of changing its ion's board of directors. I hereby accept the appointment as re- ad when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTO	registered gistered RS IN 12
agent. I am familiar with, and accept Signature, typed or printed name of OF PD MAYANI, B.T. ET ADDRESS ST-ZIP MIAMI FL SD RAFFA, STEVE	pt the obligations of, S of registered agent and title if in FICERS AND DIREC	applicable. (NOTE: R	the above-named corr torized by the corporati a Statutes. asistered Agent signature require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME	poration submits this statement for the purpose of changing its ion's board of directors. I hereby accept the appointment as request when reinstating)       Date         ad when reinstating)       DATE         ADDITIONS/CHANGES TO OFFICERS AND DIRECTO         Change	RS IN 12
agent. I am familiar with, and accept SNATURE Signature, typed or printed name of OF E PD MAYANI, B.T. 300 ROBERTS BLDO MIAMI FL E SD E RAFFA, STEVE 300 ROBERTS BLDO	pt the obligations of, S of registered agent and title if in FICERS AND DIREC	applicable. (NOTE: R TORS	the above-named corror orized by the corporati a Statutes. asistered Agent signature require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE	poration submits this statement for the purpose of changing its ion's board of directors. I hereby accept the appointment as regard when reinstating)       DATE         ad when reinstating)       DATE         ADDITIONS/CHANGES TO OFFICERS AND DIRECTO         Change	RS IN 12
agent. I am familiar with, and accept SNATURE Signature, typed or printed name of OF E PD MAYANI, B.T. 300 ROBERTS BLDG IST-ZIP MIAMI FL E SD E RAFFA, STEVE EET ADDRESS 300 ROBERTS BLDG ST-ZIP MIAMI FL 33130 E D	pt the obligations of, S of registered agent and title if in FICERS AND DIREC	applicable. (NOTE: R TORS	the above-named corr torized by the corporati a Statutes. sistered Agent signature require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE	poration submits this statement for the purpose of changing its ion's board of directors. I hereby accept the appointment as request when reinstating)       Date         ad when reinstating)       DATE         ADDITIONS/CHANGES TO OFFICERS AND DIRECTO         Change	RS IN 12
agent. I am familiar with, and accept SINATURE Signature, typed or printed name of OF PD MAYANI, B.T. 300 ROBERTS BLDO ST-ZIP MIAMI FL SD RAFFA, STEVE ST-ZIP MIAMI FL 33130 D MAYANI, M	pt the obligations of, S	Applicable. (NOTE: R TORS DELETE	the above-named corr torized by the corporati a Statutes. egistered Agent signature require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	poration submits this statement for the purpose of changing its ion's board of directors. I hereby accept the appointment as regard when reinstating)       DATE         ad when reinstating)       DATE         ADDITIONS/CHANGES TO OFFICERS AND DIRECTO         Change	RS IN 12
agent. I am familiar with, and accept SNATURE Signature, typed or printed name of OF PD MAYANI, B.T. 300 ROBERTS BLDO ST-ZIP MIAMI FL SD RAFFA, STEVE SO ROBERTS BLDO ST-ZIP MIAMI FL SO ROBERTS BLDO MAYANI, M	pt the obligations of, S	Applicable. (NOTE: R TORS DELETE	the above-named corr torized by the corporati a Statutes. asistered Agent signature require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP	FL         poration submits this statement for the purpose of changing its ion's board of directors. I hereby accept the appointment as regarded when reinstaling)         ad when reinstaling)       DATE         ADDITIONS/CHANGES TO OFFICERS AND DIRECTO         Change         Change	RS IN 12 RS IN 12 Addition Addition
agent. I am familiar with, and accept SNATURE Signature, typed or printed name of OF E PD MAYANI, B.T. 300 ROBERTS BLDO MIAMI FL E SD RAFFA, STEVE EET ADDRESS 300 ROBERTS BLDO MIAMI FL 33130 E D MAYANI, M EET ADDRESS 300 ROBERTS BLDO MAYANI, M EET ADDRESS 300 ROBERTS BLDO MAYANI, M EET ADDRESS 300 ROBERTS BLDO	pt the obligations of, S	Applicable. (NOTE: R TORS DELETE	the above-named corr torized by the corporati a Statutes. asistered Agent signature require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE	poration submits this statement for the purpose of changing its ion's board of directors. I hereby accept the appointment as regard when reinstating)       DATE         ad when reinstating)       DATE         ADDITIONS/CHANGES TO OFFICERS AND DIRECTO         Change	RS IN 12
agent. I am familiar with, and accept SNATURE Signature, typed or printed name of OF PD MAYANI, B.T. ET ADDRESS ST-ZIP MIAMI FL SD ET ADDRESS SO ROBERTS BLDO MIAMI FL SD E T-ZIP MIAMI FL SO ST-ZIP MIAMI FL SO ST-ZIP MIAMI FL SO ST-ZIP MIAMI FL SO ST-ZIP MIAMI FL SD SO ST-ZIP MIAMI FL SD ST-ZIP MIAMI FL SD ST-ZIP MIAMI FL SD ST-ZIP MIAMI FL SD ST-ZIP MIAMI FL SD ST-ZIP MIAMI FL SD ST-ZIP MIAMI FL SD ST-ZIP SD ST-ZIP MIAMI FL SD ST-ZIP MIAMI FL SD ST-ZIP MIAMI FL SD ST-ZIP SD ST-ZIP SD ST-ZIP SD SD ST-ZIP SD SD ST-ZIP SD SD SD SD SD SD SD SD SD SD	pt the obligations of, S	Applicable. (NOTE: R TORS DELETE	the above-named corr torized by the corporati a Statutes. asistered Agent signature require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP	FL         poration submits this statement for the purpose of changing its ion's board of directors. I hereby accept the appointment as regarded when reinstaling)         ad when reinstaling)       DATE         ADDITIONS/CHANGES TO OFFICERS AND DIRECTO         Change         Change	RS IN 12 RS IN 12 Addition Addition
agent. I am familiar with, and accept Signature, typed or pointed name of PD MAYANI, B.T. ET ADDRESS ST-ZIP MIAMI FL SD RAFFA, STEVE SO ROBERTS BLDO MIAMI FL SD MIAMI FL 33130 ST-ZIP MIAMI FL SO MAYANI, M	pt the obligations of, S		the above-named corporati a Statutes. a Statutes. a Statutes. asjistered Agent signature require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	Pretion submits this statement for the purpose of changing its ion's board of directors. I hereby accept the appointment as reg ed when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTO Change	RS IN 12 RS IN 12 Addition Addition Addition
agent. I am familiar with, and accept Signature, typed or printed name of OF PD MAYANI, B.T. Signature, typed or printed name of OF PD MAYANI, B.T. SO0 ROBERTS BLDG ST-ZIP MIAMI FL SO0 ROBERTS BLDG MAYANI, M ST-ZIP MIAMI FL S MAYANI, SUNIL S MAYANI, SUNIL S MIAMI FL 33130 ST-ZIP MIAMI FL S MAYANI, SUNIL SO0 ROBERTS BLDG MIAMI FL S MIAMI FL MIAMI FL S MIAMI FL S MIAMI FL S MIAMI FL S MIAMI FL MIAMI FL S MIAMI FL S MIAMI FL S MIAMI FL S MIAMI FL S MIAMI FL S MIAMI FL S MIAMI FL S MIAMI FL S MIAMI FL MIAMI F	pt the obligations of, S	Applicable. (NOTE: R TORS DELETE	the above-named corporati a Statutes. egistered Agent signature require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS	FL         poration submits this statement for the purpose of changing its ion's board of directors. I hereby accept the appointment as regarded when reinstaling)         ad when reinstaling)       DATE         ADDITIONS/CHANGES TO OFFICERS AND DIRECTO         Change         Change	RS IN 12 RS IN 12 Addition Addition
agent. I am familiar with, and accept Signature, typed or printed name of OF PD MAYANI, B.T. Signature, typed or printed name of OF PD MAYANI, B.T. SO0 ROBERTS BLDG ST-ZIP MIAMI FL SO ROBERTS BLDG MAYANI, M ST-ZIP MIAMI FL SO ROBERTS BLDG MAYANI, SUNIL ST-ZIP MIAMI FL SO ROBERTS BLDG MAYANI, SUNIL ST-ZIP MIAMI FL SO MAYANI, SUNIL ST-ZIP MIAMI FL SO MIAMI FL SO	pt the obligations of, S		the above-named corporati a Statutes. a Street ADDRESS a CITY-ST-ZIP a TITLE a STREET ADDRESS a CITY-ST-ZIP a STREET ADDRESS a CITY-ST-ZIP a STREET ADDRESS a CITY-ST-ZIP a STREET ADDRESS a CITY-ST-ZIP a STREET ADDRESS a CITY-ST-ZIP b TITLE a STREET ADDRESS a CITY-ST-ZIP b TITLE	Pretion submits this statement for the purpose of changing its ion's board of directors. I hereby accept the appointment as reg ed when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTO Change	RS IN 12 RS IN 12 Addition Addition Addition
agent. I am familiar with, and accept SIGNATURE Signature, typed or printed name of OF PD MAYANI, B.T. SIGNATURESS 300 ROBERTS BLDO MIAMI FL SD RAFFA, STEVE SO RAFFA, STEVE SO RA	pt the obligations of, S		the above-named corporati a Statutes. a Statutes. a Statutes. asistered Agent signature require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	poration submits this statement for the purpose of changing its ion's board of directors. I hereby accept the appointment as regered when reinstaling)         ad when reinstaling)       DATE         ADDITIONS/CHANGES TO OFFICERS AND DIRECTO            □ Change             □ Change             □ Change             □ Change             □ Change             □ Change	RS IN 12 RS IN 12 Addition Addition Addition Addition Addition
agent. I am familiar with, and accept SNATURE Signature, typed or printed name of PD MAYANI, B.T. Signature, typed or printed name of PD MAYANI, B.T. SOO ROBERTS BLDO ST-ZIP MIAMI FL SO FE FADDRESS SOO ROBERTS BLDO MIAMI FL SIGNAL SIGN	pt the obligations of, S		the above-named corporati a Statutes. a Street ADDRESS a CITY-ST-ZIP a TITLE a 2 NAME a 3 STREET ADDRESS a CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 5.1 TITLE 5.1 STREET ADDRESS 5.4 CITY-ST-ZIP 5.1 TITLE 5.1 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE	Pretion submits this statement for the purpose of changing its ion's board of directors. I hereby accept the appointment as reg ed when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTO Change	RS IN 12 RS IN 12 Addition Addition Addition
agent. I am familiar with, and accept SNATURE Signature, typed or printed name of PD MAYANI, B.T. Strand R.S. Straip MIAMI FL SD F SD	pt the obligations of, S		the above-named corporati a Statutes. a Statutes. a Statutes. asistered Agent signature require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	poration submits this statement for the purpose of changing its ion's board of directors. I hereby accept the appointment as regered when reinstaling)         ad when reinstaling)       DATE         ADDITIONS/CHANGES TO OFFICERS AND DIRECTO            □ Change             □ Change             □ Change             □ Change             □ Change             □ Change	RS IN 12 RS IN 12 Addition Addition Addition Addition Addition
agent. I am familiar with, and accept SNATURE Signature, typed or printed name of OF PD MAYANI, B.T. EET ADDRESS 300 ROBERTS BLDO MIAMI FL SD EET ADDRESS 300 ROBERTS BLDO MIAMI FL 33130 ED MAYANI, SUNIL 300 ROBERTS BLDO MIAMI FL ST-ZIP MIAMI FL S E MAYANI, SUNIL 300 ROBERTS BLDO MIAMI FL S E MAYANI, SUNIL 300 ROBERTS BLDO MIAMI FL S E E E E E E E E E E E E E	pt the obligations of, s	CTORS  TORS  DELETE  DELETE	the above-named corporati a Statutes. a Street ADDRESS a CITY-ST-ZIP a TITLE a 2 NAME a STREET ADDRESS a CITY-ST-ZIP a TITLE a 2 NAME a STREET ADDRESS a CITY-ST-ZIP b TITLE b 2 NAME c 3 STREET ADDRESS c 4 CITY-ST-ZIP c 1 TITLE c 2 NAME c 3 STREET ADDRESS c 4 CITY-ST-ZIP c 1 TITLE c 2 NAME c 3 STREET ADDRESS c 4 CITY-ST-ZIP c 1 TITLE c 2 NAME c 3 STREET ADDRESS c 4 CITY-ST-ZIP c 1 TITLE c 2 NAME c 3 STREET ADDRESS c 4 CITY-ST-ZIP c 1 TITLE c 2 NAME c 3 STREET ADDRESS c 4 CITY-ST-ZIP c 1 TITLE c 2 NAME c 3 STREET ADDRESS c 4 CITY-ST-ZIP c 1 TITLE c 2 NAME c 3 STREET ADDRESS c 4 CITY-ST-ZIP c 1 TITLE c 2 NAME c 3 STREET ADDRESS c 4 CITY-ST-ZIP	poration submits this statement for the purpose of changing its ion's board of directors. I hereby accept the appointment as regered when reinstaling)         ad when reinstaling)       DATE         ADDITIONS/CHANGES TO OFFICERS AND DIRECTO            □ Change             □ Change             □ Change             □ Change             □ Change             □ Change	registered gistered RS IN 12 Addition Addition