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

PROFIL CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # 640288

ITALIAN CERAMICS, CORPORATION

(7)

## **FILED** Mar 26 1997 8:00am Secretary of State

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Principal Puls coll Business											
7575 WEST 2ND CT. HIALEAH FL 33014-4303		7575 WEST 2ND CT. HIALEAH FL 33014-4303									
						3. Date Incorporated or Qualified 08/10/1979	3a. Date o		eport		
<b>2.</b> Priocipa Piace of Busines <b>21</b>	ŀ	2a. Mailing Address				4. FEI Number 59-2101323		Ap	oplied For ot Applicable		
Suite Act # etc.		Suite, Apt. #, etc			V	5. Certificate of Status Desired	□ \$	60.75			
Criy & State 23]		City & State		-		Election Campaign Financing     Trust Fund Contribution	- Promet		May Be		
[24] 25	Country	Zip	Cour	ntry	· · · · · · · · · · · · · · · · · · ·	8. This corporation has liability for i		under s	<del>, , ,</del>		
9. Name an	d Address of Current Re	egistered Agent				10. Name and Address of New Re					
PEREZ, MANUEL				81	Name						
7830 W 6TH AVE			}	B2	Street Addre	ess (P.O. Box Number is Not Acceptab	le)		**************************************		
HIALEAH FL 3301	2		-	63	5A\ do.A	THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AND ADDRESS O					
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				84	City		FL 8	Zip (	Code		
SIGNATURE SO A STANSFORM	and accept the obligation  by a parallel strategic an  OFFICERS AND DI	d nii tappi cable (60 RECTORS	"E Begistered	Ager		ed which reinstating) ADDITIONS/CHANGES TO OFFIC					
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FIRST GONZALEZ			22 NA	VE							
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STRICE LANGBOOK			33818	ALE1 /	ADDRESS						
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14. I do harehy certify that the information supplied with his filling does not qualify for the exemption stated in Section 119 07(3)(i). Florida Statutes. I further certify that the information indeed on the amount along the amount of supply mental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the cooperation or the greater 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 of changed, or or his attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR