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

FILED
Apr 23 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT **1998**

FLORIDA DEPARTMENT OF STATE
**Sandra B. Mortham**
Secretary of State
DIVISION OF CORPORATIONS

**DOCUMENT #** 674727

1. Corporation Name
P. Tavilla Co. (Miami), Inc.

Principal Place of Business | Mailing Address

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: June 24, 1980

| | |
|---|---|
| 2. Principal Place of Business (21) | 1245 NW 21st St. |
| Suite, Apt. #, etc. (22) | |
| City & State (23) | Miami, Florida |
| Zip (24) | 33142 |
| Country (25) | USA |
| 2a. Mailing Address (26) | 4721 Simonton Road |
| Suite, Apt. #, etc. (27) | c/o Bernadette Kruk |
| City & State (28) | Dallas, Texas |
| Zip (29) | 75244 |
| Country (30) | USA |

4. FEI Number: 59-2005074 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☑ Yes ☐ No

**9. Name and Address of Current Registered Agent**

**10. Name and Address of New Registered Agent**

81 Name: Walter R. Vazquez
82 Street Address (P.O. Box Number is Not Acceptable): 1245 NW 21st St.
83
84 City: Miami FL 85 Zip Code: 33142

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 obligations of Section 607.0505, Florida Statutes.

SIGNATURE [signature]
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

**12.** OFFICERS AND DIRECTORS

| | | |
|---|---|---|
| TITLE | P | ☐ DELETE |
| NAME | Vazquez, Walter R. | |
| STREET ADDRESS | 1245 NW 21st St. | |
| CITY-ST-ZIP | Miami, Florida 33142 | |
| TITLE | D, VP, AT, AS | ☐ DELETE |
| NAME | Sturgeon, Brian M. | |
| STREET ADDRESS | 4721 Simonton Road | |
| CITY-ST-ZIP | Dallas, TX 75244 | |
| TITLE | D | ☐ DELETE |
| NAME | Parker, Mitt | |
| STREET ADDRESS | 4721 Simonton Road | |
| CITY-ST-ZIP | Dallas, TX 75244 | |
| TITLE | S, T | ☐ DELETE |
| NAME | McClendon, Mark | |
| STREET ADDRESS | 16 Forest Prkwy, Bldg H | |
| CITY-ST-ZIP | Forest Park, GA 30297 | |
| TITLE | AS | ☐ DELETE |
| NAME | Kruk, Bernadette M. | |
| STREET ADDRESS | 4721 Simonton Road | |
| CITY-ST-ZIP | Dallas, TX 75244 | |
| TITLE | | ☐ DELETE |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |

**13.** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

| | | |
|---|---|---|
| 1.1 TITLE | | ☐ Change ☐ Addition |
| 1.2 NAME | | |
| 1.3 STREET ADDRESS | | |
| 1.4 CITY-ST-ZIP | | |
| 2.1 TITLE | | ☐ Change ☐ Addition |
| 2.2 NAME | | |
| 2.3 STREET ADDRESS | | |
| 2.4 CITY-ST-ZIP | | |
| 3.1 TITLE | | ☐ Change ☐ Addition |
| 3.2 NAME | | |
| 3.3 STREET ADDRESS | | |
| 3.4 CITY-ST-ZIP | | |
| 4.1 TITLE | | ☐ Change ☐ Addition |
| 4.2 NAME | | |
| 4.3 STREET ADDRESS | | |
| 4.4 CITY-ST-ZIP | | |
| 5.1 TITLE | 500002499885 | ☐ Change ☐ Addition |
| 5.2 NAME | -04/24/98--01061--031 | |
| 5.3 STREET ADDRESS | ***150.00 | |
| 5.4 CITY-ST-ZIP | | |
| 6.1 TITLE | | ☐ Change ☐ Addition |
| 6.2 NAME | | |
| 6.3 STREET ADDRESS | PE 4.23 | |
| 6.4 CITY-ST-ZIP | | |

CR2E034 (10/97)

14. I hereby 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.

**SIGNATURE:** Bernadette M Kruk Bernadette M Kruk 4/10/98 972-385-5950
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #