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**Apr 23, 1999 8:00 am**  
**Secretary of State**

04-23-1999 90172 048 \*\*\*150.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
 Secretary of State  
 DIVISION OF CORPORATIONS

DOCUMENT # 674721

1. Corporation Name  
**P. TAVILLA CO. (MIAMI), INC.**



DO NOT WRITE IN THIS SPACE

Principal Place of Business

1245 NW 21ST ST.  
 MIAMI FL 33142

Mailing Address

4721 SIMONTON ROAD  
 C/O BERNADETTE KRUK  
 DALLAS TX 75244  
 US

3. Date Incorporated or Qualified

06/24/1980

4. FEI Number

58-2005074

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 the current year Intangible Personal Property Tax.

Yes  No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

24 Zip Country

25

2a. Mailing Address

26 15305 DALLAS PARKWAY

27 Suite, Apt. #, etc. SUITE 1010; ATTN: STACY KOHN

28 City & State

DALLAS, TX

29 Zip Country

75248 USA

9. Name and Address of Current Registered Agent

VAZQUEZ, WALTER R  
 1245 NW 21ST ST.  
 MIAMI FL 33142

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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, 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 WALTER R. VASQUEZ  
 STREET ADDRESS 1245 NW 21ST TERR  
 CITY-ST-ZIP MIAMI FL 33142

TITLE ST  DELETE  
 NAME MCCLENDON, MARK  
 STREET ADDRESS 16 FOREST PKWY., 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 DVAS  DELETE  
 NAME STURGEON, BRIAN M  
 STREET ADDRESS 4721 SIMONTON ROAD  
 CITY-ST-ZIP DALLAS TX 75244

TITLE AT  DELETE  
 NAME STURGEON, BRIAN M  
 STREET ADDRESS 4721 SIMONTON ROAD  
 CITY-ST-ZIP DALLAS TX 75244

TITLE D  DELETE  
 NAME PARKER, MILT  
 STREET ADDRESS 4721 SIMONTON ROAD  
 CITY-ST-ZIP DALLAS TX 75244

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD  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 15305 DALLAS PARKWAY, SUITE 1010  
 3.4 CITY-ST-ZIP DALLAS, TX 75248

4.1 TITLE  Change  Addition  
 4.2 NAME D/VP/AS/~~AS~~  
 4.3 STREET ADDRESS 15305 DALLAS PARKWAY, SUITE 1010  
 4.4 CITY-ST-ZIP DALLAS, TX 75248

5.1 TITLE  Change  Addition  
 5.2 NAME  
 5.3 STREET ADDRESS 15305 DALLAS PARKWAY, SUITE 1010  
 5.4 CITY-ST-ZIP DALLAS, TX 75248

6.1 TITLE  Change  Addition  
 6.2 NAME D  
 6.3 STREET ADDRESS PARKER, MITT  
 6.4 CITY-ST-ZIP 15305 DALLAS PARKWAY, SUITE 1010  
 DALLAS TX 75248

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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, with all other like empowered.

SIGNATURE:

*Bernadette M. Kruk*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/14/99  
 Date

972-392-8100  
 Daytime Phone #

CR2E034 (11/98)