

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT 1995	 FLORIDA DEPARTMENT OF STATE Sandra B. Morton Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 842525 (8) 1. Corporation Name COLOR TILE, INC.
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Principal Place of Business 515 HOUSTON, POB 2475 FT WORTH TX 76113	Mailing Address 515 HOUSTON, POB 2475 FT WORTH TX 76113
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country
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3. Date Incorporated or Qualified 02/02/1979	3a. Date of Last Report 05/24/1994
4. FEI Number 75-1606185	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 has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No	

9. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324
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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
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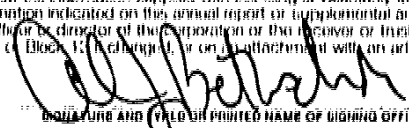
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. 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) (Signature, typed or printed name of registered agent, and title, if applicable) (Signature, typed or printed name of registered agent, and title, if applicable)

12. OFFICERS AND DIRECTORS	
TITLE	PD
NAME	NAGLE, LAURENCE N.
STREET ADDRESS	515 HOUSTON ST.
CITY, ST, ZIP	FT WORTH TX
TITLE	VS
NAME	BETHSCHEIDER, ALAN J.
STREET ADDRESS	515 HOUSTON
CITY, ST, ZIP	FT WORTH TX
TITLE	D
NAME	LESOK, EDDIE M.
STREET ADDRESS	515 HOUSTON ST.
CITY, ST, ZIP	FT. WORTH TX
TITLE	D
NAME	LOEB, WALTER J
STREET ADDRESS	280 PARK AVE / 37TH FL WEST
CITY, ST, ZIP	NEW YORK NY
TITLE	D
NAME	SOLDATOS, PAUL V.
STREET ADDRESS	280 PARK AVE. 37TH FLR W
CITY, ST, ZIP	NEW YORK NY
TITLE	VTD
NAME	GILMARTIN, DANIEL J.
STREET ADDRESS	515 HOUSTON ST.
CITY, ST, ZIP	FORT WORTH TX

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	☒ Change ☐ Addition
5.2 NAME	Treas/Asst Sec
5.3 STREET ADDRESS	Steven D. Stedman
5.4 CITY, ST, ZIP	515 Houston St. Fort Worth, TX 76102
6.1 TITLE	☒ Change ☐ Addition
6.2 NAME	Vice Pres/CFO/Asst Sec
6.3 STREET ADDRESS	William H. Pavony
6.4 CITY, ST, ZIP	515 Houston St. Fort Worth, TX 76102

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the protection afforded in Sections 1 and 2 of the 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 incorporator or the assignor 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, as changed, or on an attachment with an address.

SIGNATURE:  FULLY SIGNED AND VERIFIED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Alan J. Bethscheider VP/Sec	Date: 5/15/95	(817) 870-9400
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APPROVED
 AND
 FILED
 95 JUN 20 PM 2:41
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA
 200001519032
 -06/21/95--01039--005
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DO NOT WRITE IN THIS SPACE