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FILED
Jun 03 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # 842525 (8)
1. Corporation Name
COLOR TILE, INC.



Principal Place of Business
515 HOUSTON, POB 2475
FT WORTH TX 76113

Mailing Address
515 HOUSTON, POB 2475
FT WORTH TX 76113-2475

2. Principal Place of Business
21 201 MAIN ST.
Suite, Apt. #, etc.
22 STE. 900
City & State
23
Zip 24 76102 Country 25
2a. Mailing Address
26 201 MAIN ST.
Suite, Apt. #, etc.
27 STE. 900
City & State
28
Zip 29 76102 Country 30

3. Date Incorporated or Qualified 02/02/1979
3a. Date of Last Report 04/29/1996
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

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	PCOO	☒ DELETE
NAME	RAMAEKERS, LARRY	
STREET ADDRESS	515 HOUSTON ST.	
CITY-ST-ZIP	FT WORTH TX	
TITLE	VS	☐ DELETE
NAME	BETHSCHEIDER, ALAN J.	
STREET ADDRESS	515 HOUSTON	
CITY-ST-ZIP	FT WORTH TX	
TITLE	CEO	☐ DELETE
NAME	BROWN, BART A. JR.	
STREET ADDRESS	515 HOUSTON ST.	
CITY-ST-ZIP	FT. WORTH TX	
TITLE	VPO	☒ DELETE
NAME	PHILIPPIN, CHARLES J.	
STREET ADDRESS	280 PARK AVE / 37TH FL WEST	
CITY-ST-ZIP	NEW YORK NY	
TITLE	TAS	☒ DELETE
NAME	NUTT, MARK	
STREET ADDRESS	515 HOUSTON ST.	
CITY-ST-ZIP	FT. WORTH TX	
TITLE	CFO	☐ DELETE
NAME	FODELE, PATRICK	
STREET ADDRESS	515 HOUSTON ST.	
CITY-ST-ZIP	FT WORTH TX	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☒ Addition
1.2 NAME	D CHARLES M. MASSON
1.3 STREET ADDRESS	200 E. 84th ST. #86
1.4 CITY-ST-ZIP	NEW YORK, NY 10028-2916
2.1 TITLE	☒ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	201 MAIN ST. STE 900
2.4 CITY-ST-ZIP	76102
3.1 TITLE	☒ Change ☐ Addition
3.2 NAME	PCOOD DAVID CICHINELLI
3.3 STREET ADDRESS	201 MAIN ST. STE. 900
3.4 CITY-ST-ZIP	76102
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	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	☒ Change ☐ Addition
6.2 NAME	VCFO FODALE, PATRICK J.
6.3 STREET ADDRESS	201 MAIN ST. STE 900
6.4 CITY-ST-ZIP	76102

14. I do 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:

[Signature]

[Signature]

CR2E034 (9/96)