

... FILE FEE/FILING FEE 1 IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

FILED
Jun 04 1997 8:00am
Secretary of State

DOCUMENT # 855984

(1)

1. Corporation Name

AMERICAN MARAZZI TILE, INC.



Principal Place of Business

859 CLAY ROAD
SUNNYVALE TX 75182
US

Mailing Address

359 CLAY ROAD
SUNNYVALE TX 75182-9710
US

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

3. Date Incorporated or Qualified

04/01/1983

3a. Date of Last Report

04/29/1996

4. FEI Number

75-1699522

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

WARD, MIKE
7225 RIVER FOREST LANE
TEMPLE TERRACE FL 33617

10. Name and Address of New Registered Agent

81 Name

John D. Jones

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

16501 Bruce B. Downs #212

83

84 City

Tampa

FL

85 Zip Code

33647

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

☐ DELETE

TITLE

S LASKY, DANIEL J.

NAME

359 CLAY RD.

STREET ADDRESS

SUNNYVALE TX

CITY-ST-ZIP

TITLE

D MARAZZI, FILIPPO

NAME

VIALE REGINA PACIS, 1

STREET ADDRESS

41049 SASSUOLO, ITALY

CITY-ST-ZIP

TITLE

D SEVERI, GIAN PIETRO

NAME

VIALE REGINA PACIS, 1

STREET ADDRESS

41049 SASSUOLO, ITALY

CITY-ST-ZIP

TITLE

DP COTTICA, CARLO

NAME

359 CLAY RD.

STREET ADDRESS

SUNNYVALE TX

CITY-ST-ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

P

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☒ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☒ Change ☐ Addition

☐ Change ☒ Addition

☒ Change ☐ Addition

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

CR2E034 (9/96)