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FILED
Jan 16 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 # F46561 (9)

1. Corporation Name
VENICE TILE, INC.

Principal Place of Business

C/O ROBERT B JOHNSON
412 E. VENICE AVE.
VENICE FL 34292

Mailing Address

C/O ROBERT B JOHNSON
412 E. VENICE AVE.
VENICE FL 34292



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

3. Date Incorporated or Qualified

09/29/1981

4. FEI Number

59-2132783

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

JOHNSON, WAYNE T
1442 STRADA D'ARGENTO
VENICE FL 34292

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's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME JOHNSON, ROBERT B
STREET ADDRESS 1250 WATERSIDE LANE
CITY-ST-ZIP VENICE, FL 00000 ☐ DELETE

TITLE VTD
NAME JOHNSON, WAYNE
STREET ADDRESS 1442 STRADA D'ARGENTA
CITY-ST-ZIP VENICE, FL 00000 ☐ DELETE

TITLE SD
NAME JOHNSON, MARY K
STREET ADDRESS 1250 WATERSIDE LANE
CITY-ST-ZIP VENICE, FL 00000 ☐ DELETE

TITLE D
NAME JOHNSON, MARTHA J
STREET ADDRESS 1442 STRADA D'ARGENTA
CITY-ST-ZIP VENICE, FL 00000 ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE CEO ☒ Change ☐ Addition
12 NAME Johnson, Robert B
13 STREET ADDRESS 836 North Jackson Rd.
14 CITY-ST-ZIP Venice, FL 34292

21 TITLE PD ☒ Change ☐ Addition
22 NAME Johnson, Wayne T.
23 STREET ADDRESS 1442 Strada D'Argento
24 CITY-ST-ZIP Venice, FL 34292

31 TITLE ☐ Change ☐ Addition
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

41 TITLE ☐ Change ☐ Addition
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

51 TITLE ☐ Change ☐ Addition
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

61 TITLE ☐ Change ☐ Addition
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

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: Wayne T. Johnson Pres. 1-6-98 914-488-7372

CR2E034 (10/97)