

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

**APPROVED
AND
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95 MAY -1 AM 5:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATION
ANNUAL REPORT
1995**

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

DOCUMENT # F86990 (1)

1. Corporation Name
J & P TILES, INC.

Principal Place of Business
**12262 SW 120 ST.
MIAMI FL 33186**

Mailing Address
**12262 SW 120 ST.
MIAMI FL 33186**

2. Principal Place of Business
21 same

2a. Mailing Address
26

State Apt # etc
22

City & State
23

Zip
24

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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
06/28/1982

3a. Date of Last Report
05/01/1994

4. FEI Number
59-2207607

Applied for
☐ Yes
☒ 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 5-180(4) Florida Statutes
☐ Yes ☒ No

9. Name and Address of Current Registered Agent

**GRONLIER, JUAN F
12262 S.W. 120TH ST.
MIAMI FL 33186-2416**

10. Name and Address of New Registered Agent

81 Name

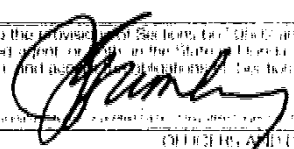
82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

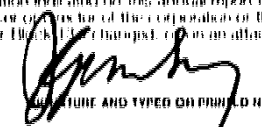
FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.01(2)(c) and 607.01(2)(d), 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 this appointment as registered agent. I am familiar with and accept the provisions of Sections 607.01(2)(c) and 607.01(2)(d), Florida Statutes.

SIGNATURE  **Juan F. Gronlier / President** **4/28/95**

12. OFFICERS AND DIRECTORS		13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS	
OFFICER	P	1 NAME	☐ Change ☐ Addition
NAME	GRONLIER, JUAN F.	2 NAME	
STREET ADDRESS	11670 SW 92 STREET	3 STREET ADDRESS	
CITY, ST, ZIP	MIAMI FL	4 CITY, ST, ZIP	
OFFICER	V	5 NAME	☐ Change ☐ Addition
NAME	GRONLIER, LUIS	6 NAME	
STREET ADDRESS	11452 SW 73 TERR	7 STREET ADDRESS	
CITY, ST, ZIP	MIAMI FL	8 CITY, ST, ZIP	
OFFICER	S	9 NAME	☐ Change ☐ Addition
NAME	GRONLIER, ITZEL	10 NAME	
STREET ADDRESS	11670 SW 92 STREET	11 STREET ADDRESS	
CITY, ST, ZIP	MIAMI FL	12 CITY, ST, ZIP	
OFFICER		13 NAME	☐ Change ☐ Addition
NAME		14 NAME	
STREET ADDRESS		15 STREET ADDRESS	
CITY, ST, ZIP		16 CITY, ST, ZIP	
OFFICER		17 NAME	☐ Change ☐ Addition
NAME		18 NAME	
STREET ADDRESS		19 STREET ADDRESS	
CITY, ST, ZIP		20 CITY, ST, ZIP	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.027(1)(a), 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 business empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 or hereafter, as an attachment with an address.

SIGNATURE:  **Juan F. Gronlier** **4/28/95 (305) 232 0112**