

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # F93000005238 (1)

1. Corporation Name

TILECERA, INC.



Principal Place of Business

300 ARCATA BLVD
CLARKSVILLE TN 37040

Mailing Address

300 ARCATA BLVD
CLARKSVILLE TN 37040

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

LITTLE, MICHAEL W
9600 SATELLITE BLVD
SUITE 100
ORLANDO FL 32837

3. Date Incorporated or Qualified
11/18/1993

3a. Date of Last Report
05/01/1995

4. FEI Number

62-1433640

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

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 607.1506, 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 of person authorized to execute this statement

Signature of Registered Agent (if not the same person as above)

Date

12. OFFICERS AND DIRECTORS

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

C
KETSUWAN, SOBSON
THE SIAM CEMENT CO LTD, 1 SIAM CEMENT RD
BANGSUE, BANGKOK, THAILAND

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

PD
WONGBUDDHAPITAK, AVRUTH
300 ARCATA BLVD
CLARKSVILLE TN

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

S
OUTLAWE, THOMAS H
300 ARCATA BLVD
CLARKSVILLE TN

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

PD
HIRUNYAWANICH, PRAYONG
300 ARCATA BLVD
CLARKSVILLE TN

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

C
NONTANAKORN, DUSIT
THE SIAM CEMENT PCL 1 SIAM CEMENT ROAD
BANGSUE BANGKOK TH

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

☐ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

☐ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

Thomas H. Outlawe
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Thomas H. Outlawe

CONTROLLER

615-645-5100

Daytime Phone #

CR2E034 (12/95)