

FILE NOW: FILING FEE AFTER MAY 1 IS \$25.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # H03414 (0)

1. Corporation Name

STAR TILE SOUTH, INC.

Principal Place of Business

Mailing Address

C/O KENNETH F. HELLMAN
2038 KANSAS AVENUE N.E.
ST. PETERSBURG FL 33703

C/O KENNETH F. HELLMAN
2038 KANSAS AVENUE N.E.
ST. PETERSBURG FL 33703



2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.

22 City & State 27 City & State

23 Zip 28 Zip

24 Country 25 Country 29 Country 30 Country

9. Name and Address of Current Registered Agent

HELLMAN, KENNETH F.
2038 KANSAS AVENUE NORTHEAST
ST. PETERSBURG FL 33703

3. Date Incorporated or Qualified

05/14/1984

3a. Date of Last Report

02/08/1995

4. FEI Number

59-2435098

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 607.1508, Florida Statutes, the ab-
or registered agent, or both, in the State of Florida. Such change was authorized by the
familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

ve-named corporation submits this statement for the purpose of changing its registered office
corporation's board of directors. I hereby accept the appointment as registered agent. I am

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 PVT
NAME HELLMAN, KENNETH F.
STREET ADDRESS 2038 KANSAS AVENUE NE
CITY-ST-ZIP ST. PETERSBURG FL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1.1 NAME

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 NAME

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 NAME

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 NAME

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 NAME

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 NAME

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☐ Addition

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and
certify that the information indicated on this annual report or supplemental annual report is
oath, that I am an officer or director of the corporation or the receiver or trustee employed
appears in Block 12 or Block 13 if changed, or on an attachment with an address.

does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further
true and accurate and that my signature shall have the same legal effect as if made under
to execute this report as required by Chapter 607, Florida Statutes; and that my name

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Kenneth Hellman 1/22/96 813-527-3766

Date

Daytime Phone #

CR2E034 (12/95)