FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT Mar 12 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham **ANNUAL REPORT** Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # H10367 (1) Dalio Tile, inc Principal Place of Business Mailing Address 2212 NW 29TH ST 2212 NW 29TH ST OAKLAND PARK FL 33311 OAKLAND PARK FL 33311 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/29/1984 2. Principal Place of Business Applied For 2a. Mailing Address 4. FEI Number 2717 N.W 29 Tel. 2717 NW 29 TERA 59-2751781 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be FL PARK ORKLAWP 23 OAKLAND A П Trust Fund Contribution Added to Fees Country 8. This corporation owes or has paid the current year Intangible Broward BROWHEN Z Yes Personal Property Tax due June 30. 29 g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name RASSNER, WAYNE H 7700 NORTH KENDALL DRIVE **B2** Street Address (P.O. Box Number is Not Acceptable) SUITE 803 83 **MIAMI FL 33156** 84 City 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. (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE TITLE 11 TITLE DADAGLIO DADAGLIO, JEAN PIERRE 1.2 NAME NAME 1194 Hillsboro Dile # 35 1086 S MILITARY TR. APT. #301 STREET ADDRESS 1.3 STREET ADDRESS DEERFIELD FL CITY-ST-ZIP 1.4 CITY-ST-ZIP Hillsboro beach FL ☐ DELETE 2.1 TITLE TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Addition 3.1 TITLE Change NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-2iP DELETE ☐ Change Addition 4.1 TITLE TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE 52 NAME NAME 53 STREET ADDRESS STREET ADDRESS 54 CHTY-ST-ZIP CITY - ST - ZIP

City-st-zip

14. Thereby 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 suppliemental 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.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

DELETE

SIGNATURE:

NAME

STREET ADDRESS

3/4/48

(954) 730-32 66

Change

Addition

FILED