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

Apr 24 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # H19250 (0) S & W TILE, INC. Principal Place of Business Mailing Address % STANLEY WINTER % STANLEY WINTER 9178 N.W. 49TH CT. 9178 N.W. 49TH CT. DO NOT WRITE IN THIS SPACE SUNRISE FL 33351 SUNRISE FL 33351 3. Date Incorporated or Qualified 08/27/1984 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2544926 Not Applicable 21 26 Suite, Apt #, etc Suite, Apt. #, etc. \$8.75 Additional Г 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 Country Zιρ Country Zip 8. This corporation owes or has paid the current year Intangible Yes 24 30 Personal Property Tax due June 30. 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name 2821 E. COMMERCIAL BLVD. 82 Street Address (P.O. Box Number is Not Acceptable) SUITE 201 83 FT. LAUDERDALE FL 33308 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 Fig. 1. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with a popular condition of Section 60. 205. Florida Statutes. SIGNATURE Signature typed printed name , stered agent and little it approprie (NOT), Registered Agent signature required when reinstating) ON ICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change TOTLE 1.1 TITLE WINTER, STANLEY NAME 1.2 NAME CR2E034 9178 N.W. 49TH CT. STREET ADDRESS 1.3 STREET ADDRESS SUNRISE FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Addition Change TITLE 2.1 TiTLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS 2. 4 DITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition NAME 3.2 NAME STREET ADDRESS 3 3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 DILE 4. 2 NAME NAME STREET ADDRESS 43 STREET ADDRESS CITY-ST-ZIP 4.4 City-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 53 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP TiTL F DELETE 6.1 7171.6 Change Addition NAME 6.2 NAME STREET ADDRESS **63 STREET ADDRESS** CITY-ST-ZIP 6.4 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 employered 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:

FILED