

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

FILED
Sep 18 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # H20881 (9)

1. Corporation Name
MCC-MARBLE CERAMIC CENTER, INC.

Principal Place of Business 3290 NW 79TH AVENUE MIAMI FL 33122	Mailing Address 3290 NW 79TH AVENUE MIAMI FL 33122
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	3. Date Incorporated or Qualified 09/10/1984 4. FEI Number 59-2468186 5. Certificate of Status Desired 6. Election Campaign Financing Trust Fund Contribution 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30	3a. Date of Last Report 06/17/1996 Applied For Not Applicable \$8.75 Additional Fee Required \$5.00 May Be Added to Fees Yes No
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9. Name and Address of Current Registered Agent SANTOS, JOSE A., JR., P.A. 201 SOUTH BISCAYNE BLVD SUITE 3000 MIAMI FL 33131	10. Name and Address of New Registered Agent 81 Name B & C CORPORATE SERVICES, INC. 82 Street Address (P.O. Box Number is Not Acceptable) 201 SOUTH BISCAYNE BLVD, SUITE 3000 83 84 City MIAMI 85 Zip Code FL 33131
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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.

SIGNATURE *Anna Salgado* ANNA SALGADO, VICE PRESIDENT 8/4/97

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MONZON, JUAN CARLOS 11340 SW 30 ST. MIAMI FL 33165	11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP	PT MONZON, JUAN CARLOS 3290 NW 79 AVENUE MIAMI, FL 33122
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPS MONZON, LIZBETH 11340 SW 30 ST. MIAMI FL 33165	21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP	VPS MONZON, LIZBETH 3290 NW 79 AVENUE MIAMI, FL 33122
TITLE NAME STREET ADDRESS CITY-ST-ZIP		31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		61 TITLE 62 NAME 63 STREET ADDRESS 64 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in information indicated on this annual report or supplemental annual report is true and accurate and that my name is an officer or director of the corporation or the receiver or trustee empowered to execute this report as appears in Block 12 or Block 13. I am changing it on an attachment with an address.

SIGNATURE: *Anna Salgado* (305) 593-0609