FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
Division of Corporations

APPROVED AND FILED

95 MAY 10 AM 10:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **J19247** **(2)**

1. Corporation Name
MANDARIN MARBLE & TILE, INC.

Principal Place of Business
5344 LOSCO RD
JACKSONVILLE FL 32257

Mailing Address
5344 LOSCO RD
JACKSONVILLE FL 32257

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **06/13/1986**
3a. Date of Last Report: **06/17/1994**

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite, Apt. #, etc. — 22 / 27
City & State — 23 / 28
Zip — 24 / 25 / 29 / 30

4. FEI Number: **59-2689153**
Applied For ☐ Not Applicable ☐

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Electronic Filing Fee and Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has ability for interstate tax under S. 199.032 Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent
LOSCO, DAVID EUGENE
5344 LOSCO ROAD
JACKSONVILLE FL 32257

10. Name and Address of New Registered Agent
B1 Name
B2 Street Address (P.O. Box Number is Not Acceptable)
B3
B4 City **FL** B5 Zip Code

11. Pursuant to the provisions of Sections 607.0505 and 607.0508 Florida Statutes, the above named corporation submits the statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. The corporation's board of directors, having accepted the appointment as registered agent, I am familiar with and accept the obligations of Section 607.0505 Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

Title	DP
NAME	LOSCO, DAVID EUGENE
Street Address	5344 LOSCO ROAD
City, State, Zip	JACKSONVILLE FL
Title	V
NAME	LOSCO, YVONNE E.
Street Address	5344 LOSCO RD.
City, State, Zip	JACKSONVILLE FL

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS

☐ Change ☐ Addition

14. I hereby certify that the information supplied with this report is accurate, complete and current at the time of filing. I further certify that the information indicated on this annual report or supplemental annual report is true and complete and that the 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 the report as required by Chapter 607, Florida Statutes, and that my name appears on Block 12 or Block 13 of changes or attached with an address.

SIGNATURE: David E. Losco
SIGNATURE AND TYPED OR PRINTED NAME OF OFFICER OR DIRECTOR

0024767 CP