FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Morthans

Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

J48225

(3)

1. Corporation Name
WORLD OF TILE AND MARBLE, INC.

						1			
Principal Place o	f Business	Mailing Address							
121 N. W. 11 STREET BOCA RATON FL 33432		121 N. W. 11 STREET BOCA RATON FL 33432							
					3. Date Incorporated or Qualified 12/16/1986 3a. Date of Last Report 04/18/1995				
2. Principal Place of Business		F1	2a. Mailing Address			4. FEI Number Applied FC 59-2736366 Not Applie			pplied For lot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired		+	Additional lequired	
City & State		City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees			
Zip	Country	28 Zip	Country 30		······································	8. This corporation has liability for intangible tax under s 199.032, Florida Statutes Yes No			199.032,
24		25 29		-T		10. Name and Address of New Registered Agent			
Name and Address of Current Registered Agent				81	Name				
Labrador, noberto 3900 nw 5th avenue Boca Raton Fl 33432				83	Street Add	ress (P.O. Box Number is Not Acceptal	oie)		
				84	'		FL	_ 1 1	p Code
	o the provisions of Sections 607.05 ed agent, or both, in the State of Fi th, and accept the obligations of, S			ove r	named corpo ioration's bos	ration submits this statement for the part of directors. Thereby accept the app	irpose of ch pointment a	langing its r s registered	egistered office Lagent, Lam
SIGNATURE	Syramic type for perhadrance of registered a	port a vitto Cappication	(NOTE BUILDING	I A.y	of signal netterpot	v.tvi. remodeling)	DATE	5 5/5074	SENCE IN LEG
12. OF HOF RS AND DI		AND DIRECTORS	13.	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	PD DELETE		TE 11	THEF		L) One		L) Change	L) Addition
NAME	LABRADOR, NORBERTO			1.2 NAME					
STREET ADDRESS	3900 NW 5TH AVE		135	1.3 STREET ADDRESS					
1	BOCA RATON FL			14 CIBY - S1 - ZIP				= 0	□ Addition
CITY-ST-ZIP TITLE	☐ DELETE		TE 2.1	2 1 MILE 2 2 NAME				☐ Change	☐ Auanom
			221						
NAME AMEET ADODESIS			233	STHEF	T ADDRESS		:		
STREET ACORESS			2.4	CITY-	ST ZIP				
CITY-ST-71P	1	DELE		TITLE				Change	☐ Addition
TITLE			■ • •		i				

64.2 If SI-2IF

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)tk), 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 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 certify 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

3.3 STREET ADDRESS

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 Ciliy - ST - ZIP

4.4 Cily - Sr - Z-P

3.4 CITY ST-ZIP

4 1 TIFLE

4.2 NAME

5-1 THEF

5.2 NAME

6 1 11/11/16

6.2 NAMir

SIGNATURE:

NAME

TITLE

NAME

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

City - ST - ZIP

CITY - ST - ZIP

CITY-ST-ZIP

MONATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DELETE

DELETE

DELE IE

4-19-96 (40) 3940248

0000100 (

Addition

Addition

Addition

Change

Change