

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 29, 1999 8:00 am
Secretary of State

03-29-1999 90067 013 ***150.00

DOCUMENT # J72448

1. Corporation Name

ORLANDO TILE CORPORATION

Principal Place of Business

7208 ALOMA AVENUE
SUITE 500
WINTER PARK FL 32792-4134

Mailing Address

7208 ALOMA AVENUE
SUITE 500
WINTER PARK FL 32792-4134

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/11/1987

4. FEI Number

59-3006384

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☐ Yes

☒ No

2. Principal Place of Business

21 4572 Palmetto Ave

Suite, Apt. #, etc.

22 (SR551)

City & State

23 Winter Park, FL

Zip

Country

24 32792 25 USA

2a. Mailing Address

26 4572 Palmetto Ave

Suite, Apt. #, etc.

27 (SR551)

City & State

28 Winter Park, FL

Zip

Country

29 32792 30 USA

9. Name and Address of Current Registered Agent

VINAS, ISRAEL A.
7208 ALOMA AVENUE
SUITE 500
WINTER PARK FL 32792

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

4572 Palmetto Ave

83 (SR551)

84 City

Winter Park,

FL

85 Zip Code

32792

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

3/26/99

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME PST
STREET ADDRESS VINAS, ISRAEL A.
CITY-ST-ZIP 7208 ALOMA AVE #500
WINTER PARK FL

TITLE ☐ DELETE

NAME D
STREET ADDRESS VINAS, ISRAEL A.
CITY-ST-ZIP 7208 ALOMA AVE #500
WINTER PARK FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME PST
1.3 STREET ADDRESS VINAS, ISRAEL A.
1.4 CITY-ST-ZIP 4572 PALMETTO AVE (SR 551)
WINTER PARK, FL 32792

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME D
2.3 STREET ADDRESS VINAS, ISRAEL A.
2.4 CITY-ST-ZIP 4572 PALMETTO AVE (SR 551)
WINTER PARK, FL 32792

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
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 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, with all other like empowered.

SIGNATURE: Israel A. Vinas

3/26/99

Date

407-679-8453

Daytime Phone #

CR25034 (11/98)