

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$275)

PROFIT CORPORATION
 ANNUAL REPORT
 1995



FLORIDA DEPARTMENT OF STATE
 Sandra B. Mortham
 Secretary of State
 DIVISION OF CORPORATIONS

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

95 JUN 22 AM 8:43

DOCUMENT # J80051 (2)

1. Corporation Name
 SOUTHERN TILE AND TERRAZZO, INC.

Principal Place of Business Mailing Address
 PO BOX 703 PO BOX 703
 MANGO FL 33550-0703 MANGO FL 33550-0703
 US US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 06/29/1987
 3a. Date of Last Report 02/03/1994

2. Principal Place of Business 2a. Mailing Address
 21 4615 No. St. Vincent 26 4615 No. St. Vincent
 Suite, Apt. #, etc. Suite, Apt. #, etc.

4. FEI Number 59-2843368
 Applied For
 Not Applicable

22 City & State 27 City & State
 23 TAMPA FL 28 TAMPA FL
 Zip Country Zip Country

5. Certificate of Status Desired \$8.75 Additional Fee Required

24 33614 25 Hillsborough 29 33614 30 Hillsborough

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199, U.S.C. Florida Statutes Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

RUMORE, STEVE C.
 350 LAKEWOOD DR., APT. 254
 BRANDON FL 33510

81 Name RUMORE, Steve C.
 82 Street Address (P.O. Box Number is Not Acceptable) 4615 No. St. Vincent
 83
 84 City TAMPA FL 85 Zip Code 33614

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 Steve C. Rumore Pres. Steve C. Rumore 6/16/95
Signature (typed or printed name of registered agent and title if applicable) (Typed) Registered Agent signature (typed when reinstating) DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D
 NAME RUMORE, STEVE C.
 STREET ADDRESS 350 LAKEWOOD DR, APT 254
 CITY - ST - ZIP BRANDON FL

1 1 TITLE Change Addition
 1 2 NAME
 1 3 STREET ADDRESS 4615 No. St. Vincent
 1 4 CITY - ST - ZIP TAMPA FL 33614

TITLE D
 NAME RUMORE, MARIA
 STREET ADDRESS 350 LAKEWOOD DR, APT 254
 CITY - ST - ZIP BRANDON FL

2 1 TITLE Change Addition
 2 2 NAME
 2 3 STREET ADDRESS 4615 No. St. Vincent
 2 4 CITY - ST - ZIP TAMPA FL 33614

TITLE
 NAME
 STREET ADDRESS
 CITY - ST - ZIP

3 1 TITLE Change Addition
 3 2 NAME
 3 3 STREET ADDRESS
 3 4 CITY - ST - ZIP

TITLE
 NAME
 STREET ADDRESS
 CITY - ST - ZIP

4 1 TITLE Change Addition
 4 2 NAME
 4 3 STREET ADDRESS
 4 4 CITY - ST - ZIP

TITLE
 NAME
 STREET ADDRESS
 CITY - ST - ZIP

5 1 TITLE Change Addition
 5 2 NAME
 5 3 STREET ADDRESS
 5 4 CITY - ST - ZIP

TITLE
 NAME
 STREET ADDRESS
 CITY - ST - ZIP

6 1 TITLE Change Addition
 6 2 NAME
 6 3 STREET ADDRESS
 6 4 CITY - ST - ZIP

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)(b), 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.

SIGNATURE: Steve C. Rumore Steve C. Rumore 6/16/95 813-879-8026
Signature (typed or printed name of signing officer or director) Date Daytime Phone #

CR2E034 (3/95)