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**PROFIT** CORPORATION ANNUAL REPORT



ELORIDA DEPARTMENT DE STATE

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Jun 09 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # J98460

PINO TILE AND MARBLE OF SOUTH FLORIDA, INC.

I am an officer or director of the corporation or the received appears in Block 12 or Block 13 if changed, or on an illag

Principal Place of Business Mailing Address 2101 W. ATLANTIC BLVD. 2101 W. ATLANTIC BLVD. POMPANO BEACH FL 33069-2635 POMPANO BEACH FL 33089 3. Date Incorporated or Qualified 3a. Date of Last Report 10/19/1987 05/01/1996 4. FEI Number Applied For 2. Principal Place of Business 2a. Mailing Address 65-0147134 Not Applicable 26 21 \$8.75 Additional Suite Apt #, etc. Sulte, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Added to Fees 26 Trust Fund Contribution 23 Zip Country 8. This corporation has liability for intangible tax under s. 199.032, Zip Country Yes No 24 25 29 30 Florida Statutes 9, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name PINO. PETER C. 2101 W. ATLANTIC BLVD. 82 Street Address (P.O. Box Number is Not Acceptable) POMPANO BCH FL 33069 83 City Zip Code 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, lyped or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. Change Addition DELETE 1.1 TITLE TITLE PINO, PETER 1.2 NAME NAME 2101 W. ATLANTIC BLVD. 1.3 STREET ADDRESS STREET ADDRESS POMPANO BEACH FL 1.4 CITY - ST - ZIP CITY-ST-ZIP Change Change Addition DELETE 2.1 1ITLE TITLE 2.2 NAME NAME STREET ADDRESS 23 STREET ADDRESS CITY-ST-ZIP 2 4 CHY-S1-ZIP Change Addition DELETE 3.1 THLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Addition DELETE 4.1 TITLE Change TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP Change Addition DELETE TITLE ... 5.1 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP Change ☐ Addition DELETE 61 TITLE TITLE 6.2 NAME NAME **63 STREET ADDRESS** STREET ADDRESS 64 CITY-ST-7IP CITY-ST-ZIP to the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the 14. I do hereby certify that the information supplied with this filing does not qualful information indicated on this annual report or supplemental influences.

o and accurate and that my signature shall have the same legal effect as if made under eath, that led to execute this report as required by Chapter 607, Florida Statutes; and that my name