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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

K21891

(2)

A. B. TILE CORP.

FILED May 05 1998 8:00am Secretary of State



												
Principal Place of Business Mailing Address								1 19919111 010 11002 11001 10110 10110 10110	#1#11 #1# 1 4 1	, in ii arbi	i Minii A	1011 1001
1025 SW 123 MIAMI FL 331			1025 SW 123 PL MIAMI FL 33184-2451				DO NOT WRITE IN THIS SPACE					
								3. Date Incorporated or Qualified				
								04/26/1988				
2. Principal Place of Business			<u></u>	2a. Mailing Address				4. FEI Number		Applied For		
21 Suite Ant	# 010			Suite, Apt. #, etc.				65-0047585		Not Applicable		
Suite, Apt. #, etc.			27	27			5. Certificate of Status Desired	\$8.75 Additional Fee Required				
City & State			├ ─┐	City & State				6. Election Campaign Financing \$5.00 May Be				
Zip Country			28	Zip Country				Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year Intangible				
24		25	— ⊢ ¬ `	<u>├</u> ¬ : : : : : : : : : : : : : : : : : : :						en yea Yes		
24	9. Name and Address of Current							Personal Property Tax due June 30. Yes No 10, Name and Address of New Registered Agent				
DAT	TALLAN, AN				8	1	Name			· .		
102	25 SW 123						Street Addre	ess (P.O. Box Number is Not Acceptable	9)			
MIA	AMI FL				В	3						
ı					8	4	City		FL	85	Zip Co	ode
11 Durement	to the province	one of Soctions 607 (1602 and 607 1509	Elevida Étalute	e the abo		named corp	oration submits this statement for the pu		chanci	na ite	ragistared
office or r	egistered acc	ont, or both, in the St h, and accept the ob	ate of Horida, Such	change was a	ulhorized I	by t	the corporation	on's board of directors. I hereby accept	the appo	ointmen	t as re	gistered
SIGNATURE												
12.	Signature, typica	or printed name of registered	AND DIRECTORS	e (NOTE	13.	igen.	signature require	od when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE RS AND	DIBEC	TORS	IN 12
TITLE	PD	011101101		DELETE	1.1 TITLE			ADDITIONS/CITATES TO OTT TO	TIO AIND	Char		Addition
NAME		IN, ANGEL L.	•		12 NAMI							
STREET ADDRESS	1025 SW				1.3 STRE		INDRESS					
CITY-ST-ZIP	MIAMI FO				1.4 CITY		1					
TITLE				DELETE	2.1 TITLE					☐ Chai	nge	Addition
NAME					2.2 NAMI	Ē						
STREET ADDRESS					2.3 STRE	E1 A	DDRESS					
CITY-ST-ZIP					2. 4 CITY		1					
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STREET ADDRESS					4.3 STRE	ET A	IDDRESS					j
CITY-ST-ZIP					4.4 CITY	-ST-	- ZIP					
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NAME					5.2 NAM	E						
STREET ADDRESS					5.3 STRE	ET A	IDORESS					
CITY-ST-ZIP					5.4 CITY							
TITLE				DELETE	6.1 TITLE	_				Char	nge	Addition
NAME					62 NAMI	Ε)					
STREET ADDRESS					6.3 STRE		ODRESS					
CITY-ST-ZIP					6.4 CITY							

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 eath; 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.