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

DOCUMENT # K80322 1. Corporation Name

ELANA TILE & MARBLE, INC.

Principal Place of Business

Mailing Address

FILED May 05, 1999 8:00 am Secretary of State

05-05-1999 90230 011 ***163.75



| 6569 RACQUET CLUB DR. LAUDERHILL FL 33319 | | 6569 RACQUET CLUB DR. LAUDERHILL FL 33319 | | | | | | | | | | | | |
|--|---------------------------------------|---|---------------------|--------------------|----------------|---|---------|-----------|----------|--------|--------------|-------------|-----------|-------------|
| | | | | | | | | | | | E IN THIS | SPAC | Ē | |
| | | | | | | | | | ed or Qu | alifed | | | | |
| | | | | | | | | 11989 | | | | — | | |
| 2. Principal Pl | lace of Business | 2a. Mailing Address | 2a. Mailing Address | | | 4. FEI Number | | | | | | Applied For | | |
| 21 | | 26 | | | | 00 0 12001 0 | | | | | | | | Applicable |
| Suite, Apt. | #, etc. | Suite, Apt. #, etc. | Suite, Apt. #, etc. | | | 5. Certificate of Status Desired \$8.75 Additional Fee Required | | | | | | | | |
| 22 | | 27 | | | | | | | | | · | | | |
| City & State | 9 | City & State | City & State | | | 6. Election Campaign Financing \$5.00 May Be | | | | | | | | |
| 23 | | 28 | | | | Trust Fund Contribution Added to Fees | | | | | | | | |
| Zip | Country | Zip | | | | 8. This corporation owes the current year intangible Personal Property Tax. | | | | | | | | |
| 24 | 25 | 29 | 29 30 | | | Personal Property Tax. | | | | | | | | |
| | 9. Name and Address | of Current Registered Agent | | <u> </u> | | 10. N | Name a | and Add | ress of | New R | egistered / | \gent | | |
| | 1010 | | 81 | ¹ ^ | Vame | | | | | | | | | |
| | AGLO | | 82 Street Ad | | | ddress (P.O. Box Number is Not Acceptable) | | | | | | | | |
| | RACQUET CLUB DR | | | | | ` | | | | | | | | |
| LAŲĮ | DERHILL FL 33319 | | 83 | 3 | | | | | | | | | | |
| 3.3 3.5 t | | in the second | 84 | 4 6 | Ties. | | | | | | | 85 | Zip Co | ode |
| .* | The stands of | | . 04 | ٠,٠٠ | Çity | | d . | | • | | FL | 55 | p 0 | , - |
| 11. Pursuant | to the provisions of Section | is 607.0502 and 607.1508, Florida Statute | s, the abov | ve-n | amed cor | poration s | submit | this sta | tement f | or the | purpose of | chang | ing its r | egistered . |
| office or re | paintared agent or both in | the State of Florida. Such change was au the obligations of, Section 607.0505, Flori | Inorizea ov | VINE | e corporat | tion's boar | rd of d | irectors. | l hereby | accep | t the appoir | ıtment | as regi | stered |
| SIGNATURE | Signature, typed or printed name of r | registered agent and title if applicable. (NOTE: | Registered Age | ent siç | gnature requir | | | | | | DATE | | | |
| 12, | OFF | ICERS AND DIRECTORS | 13. | | | AE | DITIO | NS/CHA | NGES 1 | ro of | FICERS AN | | | |
| TITLE | P | DELETE | 1.1 TITLE | | | | | | | | | Ци | hange | Addition |
| NAME | Buzaglo, Eli | | 1.2 NAME | : | | | | | | | | | | |
| STREET ADDRESS | 6569 RACQUET CLUB DR. | | 1.3 STRE | 1.3 STREET ADDRESS | | | | | | | | | | |
| CITY-ST-ZIP | LAUDERHILL FL 33319 | 9 | 1.4 CITY- | ST-ZI | IP. | | | | | | | | | |
| TITLE | | ☐ DELETE | 2.1 TITLE | | | | | | | | | □ Ct | hange | Addition |
| NAME | | | 2.2 NAME | : | | | | | | | | | | |
| STREET ADDRESS | | | 2.3 STREI | .3 STREET ADDRESS | | | ~ | | | | | | | |
| CITY-ST-ZIP | | | 2. 4 CITY- | -ST-Z | ZIP | | | | | | | | | |
| TITLE | | ☐ DELETE | 3.1 TITLE | | | | | | | | | | hange | Addition |
| NAME | | | 3.2 NAME | | | | | | | | | | | |
| STREET ADDRESS | | | 3.3 STREI | ET AD | DDRESS | | | | | | | | | |
| CITY-ST-ZIP | | | 3.4. CITY- | -ST-Z | ZIP | | | | | | | | | |
| TITLE | | ☐ DELETE | 4.1 TITLE | | | | | | | | | | hange | Addition |
| NAME | | | 4, 2 NAME | E | | | | | | | | | | |
| STREET ADDRESS | | | 4.3 STREE | ET AD | OORESS | | | | | | | | | |
| | | | 4.4 CITY- | | | | | | | | | | | |
| CITY-ST-ZIP | 2 | ☐ DELETE | 5.1 TITLE | | * | | | | | | | | hange | . Addition |
| ! | | | 5.2 NAME | | | • | | | | | | | | |
| NAME | | | 5.3 STRE | | ODRESS | | | | | | | | | |
| STREET ADDRESS | | | 5.4 CITY- | | | | | | | | | | | |
| CITY-ST-ZIP | · | ☐ DELETE | 6.1 TITLE | | | | | | | | | | hange | Addition |
| TITLE | | □ bere:c | 6.2 NAME | | | | | | | | | _, _ | | |
| NAME | | | 1 | | | | | | | | | | | |
| OTDEET ADDDESS | l | | 6.3 STRE | :⊏IAD | コロベビング | | | | | | | | | |

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.

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS