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

PROFIT CORPORATION ANNUAL REPORT

1998



Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(4)

CUBA-TILE, INCORPORATED

FILED Mar 04 1998 8:00am Secretary of State



Principal Place of Business Mailing Addres			is			I IOBJONK BON JAKAN JANNI ANDLO NEBDE NINI BIDIN BIDIN DIDIN DARIN DIDIN DIDIN DIDIN DIDIN DIDIN NOGL		
12436 SW 205 TERR MIAMI FL 33177		12436 SW 203 TERR MIAMI FL 33177				·		
						DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified	OUNCE	
						05/16/1989		
2. Principal P	lace of Business	2a. Mailing Addres	is			4. FEI Number	I A	pplied For
21		26	26			65-0118884	N	ot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, e	Suite, Apt. #, etc.			5 Cortificate of Status Decired S8.75 Additional		
22		27	27			6. Certificate of Status Desired L.J	Fee R	equired
City & State		City & State	City & State			6. Election Campaign Financing \$5.00 May Be		
23		28				Trust Fund Contribution	Added	to Fees
Zip	Country	Zip	h	untry		8. This corporation owes or has paid the o		
24	9. Name and Address of Curr	29	30			Personal Property Tax due June 30. 10. Name and Address of New Registers		□ No
20		aur vedistalen vilaur	B1	Name	10. Name and Address of New Registers	n võest		
	UZA, RICARDO							
	436 SW 203 TERR		82 Street Ad		Street Addres	ss (P.O. Box Number is Not Acceptable)		
MU	AMI FL 33177			83				
				اسا			_	
				84	City	F	65 Zip	Code
44 Direvent	to the provisions of Spelions 507.0	E03 and 607 1509. Elevida	Ctatuton the o	hovo #	named corpo			to registered
office or r	egistered agent, or both, in the Sta	ate of Florida. Such change	was authorize	d by th	na corporatio	n's board of directors. I hereby accept the a	ppointment as	registered
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								
12.		AND DIRECTORS	13.	o Again	aigriator o radoneo	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO	RS IN 12
TITLE	PSD	☐ DELE	TE 1.5 T	ITLE			☐ Change	☐ Addition
NAME	POUZA, RICARDO		1.2 N	AME				
STREET ADDRESS	10100 011 000 7500		1.3 STREET ADDRESS		DORESS			
CITY-ST-ZIP	miami fl		1.4 C	ITY-ST-	ŽIP			
TITLE	VTD	☐ DELE	TE 2.1 T	ITLE			☐ Change	☐ Addition
NAME	COBREIRO, JESUS L		2.2 N	2.2 NAME				ĺ
STREET ADDRESS	12436 SW 203 TERR		2.3 ST		ODRESS			ļ
CITY-ST-ZIP	MIAMI FL			CITY-ST-	ZIP			
TITLE		☐ DELE	TE 3.1 T	ITLE			Change	Addition
NAME			3.2 N	AME				ļ
STREET ADDRESS			335	TREET AD	DRESS			į
CITY-ST-ZIP				CITY-ST-	ZIP			
TITLE		☐ DELE	TE 4.1 T	ITLE			Change	☐ Addition
NAME			4.21	NAME]
STREET ADDRESS			4.3 S	TREET AD	DORESS			ĺ
CITY-ST-ZIP				ITY-ST-	ZIP			
TITLE		☐ DELE	TE 5.1 T	ITLE			☐ Change	Addition
NAME			5.2 N		1			
STREET ADDRESS			5.3 S	TREET AD	ODRESS			ļ
CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·		ITY-ST-	ZIP			
TITLE		DELE					☐ Change	Addition
NAME			62 N					l
STREET ADDRESS			6.3 S	TREET AD	idress			1
CITY-ST-ZIP				ITY-ST-				- Indiana di
34 I baraby s	vertice that the information conclude	Lwith this files door not a	valid, for the ev	amatia	a ptoted in S	ection 110 07/3\/i) Florida Statutos further	costitui that the	a intermetion I

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 informatio 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.

GNATURE:

GNATURE:

Sylvant Communication 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 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.

GNATURE:

SIGNATURE: