

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



CLERK OF THE DEPARTMENT OF STATE
MARILYN B. MONTGOMERY
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

DOCUMENT # L30345

(7)

55 MAY -1 PM 2:34

1. Corporation Name

ATLANTIC TILE CONTRACTOR, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

2681 WEST 76 STREET
90 W 43RD ST
HIALEAH FL 33016
US

Mailing Address

% DELFIN BLANCO
90 W 43RD ST
HIALEAH FL 33012

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
11/17/1989

3a. Date of Last Report
07/20/1994

4. FEI Number
65-0154622

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This Corporation has liability for intangible tax under a 1987 U.S.
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

21

2b. Mailing Address

26

State, Apt. # etc.

22

State, Apt. # etc.

27

City & State

23

City & State

28

Zip

24

Country

25

Zip

29

Country

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BLANCO, DELFIN
90 W 43RD ST
HIALEAH FL 33012

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0603 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 607.0603, Florida Statutes.

SIGNATURE

D. Blanco

5/1/95

12. OFFICERS AND DIRECTORS

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	DP
NAME	BLANCO, DELFIN
STREET ADDRESS	90 W 43RD ST
CITY, ST, ZIP	HIALEAH FL
TITLE	DVT
NAME	HENRIQUEZ, ALEJANDRO
STREET ADDRESS	90 W 43RD ST
CITY, ST, ZIP	HIALEAH FL
TITLE	DS
NAME	BLANCO, ORLANDO
STREET ADDRESS	1463 W 83 ST
CITY, ST, ZIP	HIALEAH FL
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

1. TITLE	☐ Change ☐ Addition
2. NAME	
3. STREET ADDRESS	
4. CITY, ST, ZIP	
5. TITLE	☐ Change ☐ Addition
6. NAME	
7. STREET ADDRESS	
8. CITY, ST, ZIP	
9. TITLE	☐ Change ☐ Addition
10. NAME	
11. STREET ADDRESS	
12. CITY, ST, ZIP	
13. TITLE	☐ Change ☐ Addition
14. NAME	
15. STREET ADDRESS	
16. CITY, ST, ZIP	
17. TITLE	☐ Change ☐ Addition
18. NAME	
19. STREET ADDRESS	
20. CITY, ST, ZIP	

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(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: X

D. Blanco

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/1/95

824-9908