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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

1. Corporatio	A CUSTOM TILE, INC.					
1635 BRANDYWINE WAY DUNEDIN FL 34698		Mailing Address 1635 BRANDYWINE WAY DUNEDIN FL 34698				
				3. Date Incorporated or Qualified 02/22/1990	3a. Date of Last Report 04/25/1995	
·	2. Principal Place of Business 2a. Mailing Address			4. FEI Number	Applied For	
		26		59-2995287	Not Applicable	
22		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
0: 40:		City & State			Fee Required	
23		28		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be	
Zip	Country	Zip	Country	8. This corporation has liability for in	Added to Fees	
24	25	29	30	Florida Statutes Yes	No	
	9. Name and Address of Curren	nt Registered Agent		10. Name and Address of New Re		
00014	14710774		81 Name			
SCOLA, KRISTINE			82 Street Add	82 Street Address (P.O. Box Number is Not Acceptable)		
1635 Brandywine way Dunedin Fl. 34698						
DUNED	114 FL 34096		63			
			84 City		85 Zip Code	
11. Pursuant t	to the provisions of Sections 607 0502	and 607 1509 Chaids State	don the object	al on submits this statement for the purp	<u> </u>	
or register	red agent, or both, in the State of Floric th, and accept the obligations of Sect	Li Such change was authori	ites, the above named corpor ized by the corporation's boa	ration submits this statement for the purp rd of directors. Thereby accept the appoi	pose of changing its registered office introduced as registered agent. Lan	
	and coopi the conganons of Soci	on 697.0505, Horida Statute	S	, , , , , , , , , , , , , , , , , , , ,	Jan San San San San San San San San San S	
SIGNATURE _	Sky at an hyped or printed hands of registered eyent	J. C. C. C	offe Bijoterat Agait signature regura	discher percelation.	DATE	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFIC		
THILE	P	☐ DELEH	1 1 TITLE		Change Addition	
NAME	SCOLA, LAWRENCE		1.2 NAME			
STREET ADDRESS	1635 BRANDYWINE WAY		1.3 STREET ADDRESS			
CITY - ST - ZIP	DUNEDIN FL S		1.4 CHTY - ST - ZHP			
NAME	SCOLA, KRISTINE	☐ DELETE	2 ' THTLE	•	Change Addition	
STREET ADDRESS	1635 BRANDYWINE WAY		2.2 NAME			
CITY-ST-ZIP	DUNEDIN FL		2.3 STREET ADDRESS			
TITLE	DOILE MY FE	[] DELFTE	2.4 CITY - ST - ZIF			
NAME			3 1 1111.6		Change Addition	
STREET ADDRESS			3.2 NAME 3.3 STREET ADDRESS			
CITY-S1-ZIP			34 CHY-ST-ZiP			
TITLE		☐ DELETE	4 1 TifuE		Change Addition	
NAME			4.2 NAME		C overse C vagital	
STREET ADDRESS			4.3 STREET ADDRESS			
CITY - ST - ZIP			4.4 CITY ST-ZIP			
TITLE		DELETE	5 THILE		Change Addition	
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY - ST - ZIP			5 4 CITY - ST - ZIP			
TITLE		DELETE	6 1 11/1/6		☐ Change ☐ Addition	
NAME CIPCLI ADDRESS			6 2 NAME			
STREET ADDRESS			6.3 STHEFT ADDRESS			

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and closs not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or suppliemental 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 slock 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE:

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

Output Printing III and II

813-733-8874