## 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

SIGNATURE:

(8)

DOCUMENT # 1. Corporation Name DANIELLA TILE & MADDLE INC

FANELL	A TILE & MANDLE, IN	<b>U</b> .							
Principal Place of	of Business	Mailing Address					IDI DIBIL DIBIL BI	/UE <b>UE U</b> E (	81811 61814 <b>100</b> 1
5550 SW 58TH CT DAVIE FL 33314 US		· ·	PANELLA TILE & MARBLE. INC. 5550 SW 58TH CT.						
00		US				3. Date Incorporated or Qualified 08/15/1990	3a. Date of 05/0	Last Re 1/199	
2. Principal Pla	ce of Business	2a. Mailing Address				4. FEI Number			Applied For
21		26	<u> </u>			<b>65-0221832</b> Not Applicable			
Suite, Apt. #	, etc.	Suite, Apt. #, etc.	27			Certificate of Status Desired     \$8.75 Additional     Fee Required			
City & State		City & State	<del></del>			6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees			
Zip Country		Zip	Zip Country			8. This corporation has liability for intangible tax under s 199.032,			
24	25	29	[30]			Florida Statutes Yes No  10. Name and Address of New Registered Agent			
	9. Name and Address of C	urrent registered Agent		31	Name	10. Name and Address of New N	gyistereu Ay	2111	
DANELLA	, PAUL A.		L						
	SW 58TH CT.		82 Street Ad			ss (P.O. Box Number is Not Acceptable	e)		
DAVIE FL			83						
			1	34	City		EI	85 Zi	ip Code
11 Pursuant to	the provisions of Sections 607	0502 and 607 1508. Florida Statute	s. the abov	 e-na	amed corporal	tion submits this statement for the purp	oose of chang	ina its r	reaistered office
or registere	ed agent, or both, in the State o	if Florida. Such change was authorize , Section 607.0505, Florida Statutes.	of by the co	эгрс	oration's board	of directors. I hereby accept the appo	intment as re	gistered	i agent. I am
SIGNATURE	Signature, typed or printed name of registers	no poved a vistile é apose abla (AO)	(f : Dogistared A	t	signature required v	ahan reinstativeli	DATE		
, 12.		RS AND DIRECTORS	13.	- GOIL	agradue required t	ADDITIONS/CHANGES TO OFF		RECTO	DRS IN 12
11TLE	P	DELETE	1. 1 TIT	LE				Change	Addition
NAME	PANELLA, PAUL A		1.2 NAM	ИE					
STREET ADDRESS	5550 SW 58TH CT.		1.3 STR	EE1 A	ADDRESS				
CITY-ST-ZIP	DAVIE FL 33314		1.4 CIT	Y-51	I-ZIP				
TITLE	V	DELETE						Change	Addition
NAME	PANELLA, DARLENE M		2.2 NAN	<b>∕</b> E	ļ				
STREET ADDRESS	5550 SW 58TH CT.		2.3 STR	2.3 STREET ADDRESS					
CITY-ST-ZIP	DAME FL 33314		2 4 CIT		I - ZIP			Change	☐ Addition
TITLE	D BANGUA FUOCNE	☐ DELETE	3. 1 TiT				Ļ	Change	☐ MODITION
NAME	PANELLA, EUGENE 5550 SW 58TH CT.		3.2 NAM		IDDDGGG				
STREET ADDRESS	DAVIE FL 33314		3.3. STI		ADDRESS				
CITY-ST-ZIP TITLE	DATIL I L 00017	[7] DELETE	4 1 11	_	1 - Zir			Change	Addition
NAME		<b>—</b>	4 2 NA			000000182	:U36	1_1	
STREET ADDRESS					ADDRESS	-05/14/96010	155F		
CITY-ST-ZIP			4.4 GIT			***200.00			
TITLE		DELETE	5 1 717					Change	☐ Addition
NAME			5.2 NAF	ME		\	<i>U</i>		
STREET ADDRESS			5.3 STP	REET.	ADDRESS	C	$\sim$		
CITY-ST-ZIP			5.4 CIT		T-ZIP		¢		<b>—</b>
TITLE		DELETE	6 1 TIT			, , ``	彳口	Change	☐ Addition
NAME			6.2 NAI			₩.			
STREET ADDRESS					ADDRESS	• •			
CITY-ST-ZIP	y certify that the information sur	onlind with this filing is voluntarily hard	6.4 CiT	loos	s not qualify fo	r the exemption stated in Section 119.	07(3)(k) Florid	a Stati	ites. I further
certify that	the information indicated on thi	is annual report or supplemental annual corporation or the requiver or trustered, or on an attachment with an addr	ual report is	tru ed t	ie and accurati to execute this	e and that my signature shall have the report as required by Chapter 607, Fig.	same legal eff orida Statutes	ect as and th	if made under nat my name

4/30/94 9544288251