

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

FILED
Apr 14, 1999 8:00 am
Secretary of State

04-14-1999 90037 039 ***158.75

PROFIT CORPORATION
 ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # M12749

1. Corporation Name
COUSINS TILE CONTRACTORS, INC.



Principal Place of Business
 70 BAHAMA AVE
 KEY LARGO FL 33037
 US

Mailing Address
 70 BAHAMA AVE
 KEY LARGO FL 33037
 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
03/18/1985

4. FEI Number **59-2521769** 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 owes the current year Intangible Personal Property Tax. Yes No

2. Principal Place of Business
 21 **15743 SW 90 Terr**

2a. Mailing Address
 26 **70 Bahama Ave**

Suite, Apt. #, etc.
 22

Suite, Apt. #, etc.
 27

City & State
 23 **MIAMI Fla**

City & State
 28 **Key Largo Fla**

Zip Country
 24 **33196** 25 **DA DE**

Zip Country
 29 **33037** 30 **MONROE**

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

~~VAZQUEZ, JESUS
 30150 SW 162 AVE.
 HOMESTEAD FL 33022~~

NEW: JESUS VAZQUEZ
15743 SW 90 Terr
MIAMI FL
33196

81 Name **JESUS VAZQUEZ**
 82 Street Address (P.O. Box Number is Not Acceptable)
15743 SW 90 Terr
 83 **MIAMI Fla**
 84 City **MIAMI** FL 85 Zip Code **33196**

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]* DATE **4-1-99**

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	P	<input type="checkbox"/> DELETE
NAME	VASQUEZ, JESUS	
STREET ADDRESS	70 BAHAMA AVE	
CITY-ST-ZIP	KEY LARGO FL 33037	
TITLE	S	<input type="checkbox"/> DELETE
NAME	VASQUEZ, GLADYS	
STREET ADDRESS	70 BAHAMA AVE	
CITY-ST-ZIP	KEY LARGO FL 33037	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

1.1 TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	VAZQUEZ Jesus	
1.3 STREET ADDRESS	70 Bahama Ave	
1.4 CITY-ST-ZIP	Key Largo FL 33037	
2.1 TITLE	S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	VAZQUEZ Gladys	
2.3 STREET ADDRESS	70 Bahama Ave	
2.4 CITY-ST-ZIP	Key Largo FL 33037	
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 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.

SIGNATURE: *[Signature]* DATE: **4-1-99** DAYTIME PHONE #: **305-451-0533**

CR2E034 (11/98)