

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M58545 (8)

1. Corporation Name
MEARS TILE & MARBLE, INC.



Principal Place of Business

**C/O BRENDA THOMPSON
6651 N.W. 20TH STREET
MARGATE FL 33063**

Mailing Address

**C/O BRENDA THOMPSON
6651 N.W. 20TH STREET
MARGATE FL 33063**

3. Date Incorporated or Qualified
09/03/1987

3a. Date of Last Report
08/08/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number
65-0004911

Applied For
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

City & State

City & State

23

28

6. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

24

25

Country

29

30

Zip Country

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**THOMPSON, BRENDA
1441 S.W. 30 AVENUE
POMPANO BEACH FL 33069**

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 607.0502 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's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE
NAME **P THOMPSON, BRENDA**
STREET ADDRESS **6651 N.W. 20TH ST.**
CITY-ST-ZIP **MARGATE FL**

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME **P BRENDA MEARS**
1.3 STREET ADDRESS **> SAME**
1.4 CITY-ST-ZIP

TITLE ☒ DELETE
NAME **ST THOMPSON, RICHARD SR**
STREET ADDRESS **6651 NW 20 ST**
CITY-ST-ZIP **MARGATE FL**

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME **ST RICHARD L. THOMPSON, JR**
STREET ADDRESS **6942 SW 19 MANOR**
CITY-ST-ZIP **POMPANO BEACH, FL 33068**

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does 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 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:

Brenda Mears
BRENDA MEARS, PRESIDENT

5/16/96 (954) 972-6260
Date Daytime Phone #

CR2E034 (12/95)