

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

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # M59429

(4)

1. Corporation Name

AMERICAN TILE & MARBLE CORP.

Principal Place of Business

2789 FOREST HILL BLVD.
WEST PALM BEACH FL 33406

Mailing Address

2789 FOREST HILL BLVD.
WEST PALM BEACH FL 33406

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

ESCALADA, ALFREDO
2212 PARK STREET
LAKE WORTH FL 33460

81

N

82

S

83

84

C

3. Date Incorporated or Qualified

09/21/1987

3a. Date of Last Report

04/22/1994

4. FEI Number

65-0033858

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

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

10. Name and Address of New Registered Agent

FL

85 Zip Code

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13.

TITLE

PD
ESCALADA, ALFREDO
956 SUMTER RD E
W PALM BCH FL

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-STATE-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-STATE-ZIP

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change

☐ Addition

☐ Change

☐ Addition

☒ Change

☐ Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-STATE-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not
certify that the information indicated on this annual report or supplemental annual report is true
and that I am an officer or director of the corporation or the receiver or trustee empowered to
appear in Block 12 or Block 13 if changed or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Donna M. Escalada - Secretary

I certify for the exemption stated in Section 110.07(3)(4), Florida Statutes, I further
certify and that my signature shall have the same legal effect as if made under
in this report as required by Chapter 007, Florida Statutes; and that my name

1/13/95 407-433-3841