## FILE NOW: FILING FEE AFTER MAY 1 IS \$556

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT

Sandra B. Mort Secretary of Sta

DIVISION OF CORPOR TIONS

DOCUMENT # M59429

AMERICAN TILE & MARBLE CORP.

Principal Place of Business 2789 FOREST HILL BLVD. WEST PALM BEACH FL 33406 Mailing Address

2s. Mailing Address

2789 FOREST HILL BLVD. WEST PALM BEACH FL 33408-5955

**FILED** Jan 30 1997 8:00am Secretary of State

3a. Date of Last Report

Applied For

04/02/1996



3. Date Incorporated or Qualified

OMO M. EXALADA 1/20/97 56/-4333841

09/21/1987

4. FEI Number

2. Principal Pla	ace of Business	28. Mailing Address 26 Suite, Apt. #, etc. 27			4. FEI Number 65-0033858			optied For
21								ot Applicable
Suite, Apt. 4	#, etc.				5. Certificate of Status Desired			
City & State City & State					Election Campaign Financing \$5.00			May Be
23 28				Trust Fund Contribution Added		<b>*</b>	to Fees	
Zip	Country	Zip	Count	У	8. This corporation has liability for in			i. 199.032,
24	25 29 30				Florida Statutes Yes No			
	9. Name and Address of Curren	t Registered Agent		.1	10. Name and Address of New Reg	istered A	gent	
2212 PARK STREET LAKE WORTH FL 33460				Name				
				82 Street Address (P.O. Box Number is Not Acceptable)				
				83				
11. Pursuant t	to the provisions of Sections 607.050	2 and 607,1508, Florida Statut	es, the abo	ve-named corp	poration submits this statement for the po- tion's board of directors. I hereby accep	urpose of	changing i	ts registered
agent. Lar	egistered agent, or born, in the state in familiar with, and accept the obliga	ations of, Section 607.0505, Flo	orida Statut	es.	ion's board of directors. Theraby accep	t the table	minimonic de	- Cyrolarda
SIGNATURE								
	Signstore: typed or printed name of registered age			gent signature requi	red when reinstating)	DATE	DIDECTO	20 IN 12
12,	OFFICERS AND	DELETE	13.		ADDITIONS/CHANGES TO OFFICE	ENS AND	Change	4 3 195
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NAME	ESCALADA, ALFREDO 956 SUMTER RD E		1.2 NAM	1				ļ
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NAME	2212 PARK STREET		2.2 NAM					
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				-ST-ZIP				
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STREET ADDRESS				ET ADDRESS	•			
				- ST - ZIP				
CITY-ST-ZIP TITLE		DELETÉ	61 TITLE				Change	☐ Addition
NAME			6 2 NAM				,	
STREET ADDRESS				ET ADDRESS				
CITY - ST - ZIP				-ST-ZIP				
14 1 do bosot	i by certify that the information supplie	d with this filing does not qual	fy for the e	remotion state	d in Section 119.07(3)(i), Florida Statutes	s. I further	certify tha	t the
informatio	in indicated on this annual report or s	supplemental annual report is t	true and ac	curate and tha	t my signature shall have the same lega	l effect as	if made ui	nder oath; that i