

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

FILED  
Mar 25 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P93000008947  
1. Corporation Name

NTM TILES & MARBLES CORP.

Principal Place of Business <b>13511 NW 7TH TERR MIAMI, FL, 33182</b>	Mailing Address <b>13511 NW 7TH TERR MIAMI, FLORIDA, 33182</b>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business <b>21 SAME THAN ABOVE</b> Suite, Apt. #, etc.		2a. Mailing Address <b>26 SAME THAN ABOVE</b> Suite, Apt. #, etc.		3. Date Incorporated or Qualified <b>02/04/93</b>	
22 City & State		27 City & State		4. FEI Number <b>65-0385101</b> Applied For <input type="checkbox"/> Not Applicable <input type="checkbox"/>	
23 Zip		28 Zip		5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
24 Country		29 Country		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
25				30	
7. Name and Address of Current Registered Agent <b>AGUIAR NELSON" 13511 NW 7TH TERRACE MIAMI, FLORIDA, 33182</b>				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

10. Name and Address of New Registered Agent	
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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>Pd</b>	1.2 NAME	
STREET ADDRESS	<b>AGUIAR NELSON</b>	1.3 STREET ADDRESS	
CITY-ST-ZIP	<b>13511 N.W 7TH TERRACE</b>	1.4 CITY-ST-ZIP	
	<b>MIAMI, FLORIDA, 33182</b>		
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>VPD</b>	2.2 NAME	
STREET ADDRESS	<b>AGUIAR NORMA</b>	2.3 STREET ADDRESS	
CITY-ST-ZIP	<b>13511 NW 7TH TERRACE</b>	2.4 CITY-ST-ZIP	
	<b>MIAMI, FLORIDA, 33182</b>		
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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 only in attachment with an address.

SIGNATURE:  **NELSON AGUIAR**  
PRESIDENT  
03/18/98 305-559-2920

CR2E034 (10/97)