

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 # P93000040759

1. Corporation Name

NEW CONCEPT MARBLE & TILE

Principal Place of Business

5975 S.W. 137 Ave.

Casa 801

Miami, Florida 33183

Mailing Address

5975 S.W.137 Ave.

Casa 801

Miami, Florida 33183

3. Date Incorporated or Qualified
06/09/1993

3a. Date of Last Report
03/31/95

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 1645 NE. 182 St.

27 1645 NE 182 St.

City & State

City & State

23 MIAMI BEACH, FL.

28 MIAMI BEACH, FL.

Zip

Country

Zip

Country

24 33162

25 DADE

29 33162

30 DADE

4. FEI Number

65-0416072

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

9. Name and Address of Current Registered Agent

FIRST GLOBAL CORPORATION
6191 Orange Dr.
Suite 6159-E
FT. LAUDERDALE, FL. 33314

10. Name and Address of New Registered Agent

81 Name

Julio Rojas

82 Street Address (P.O. Box Number is Not Acceptable)

1645 NE. 182 ST.

83

84 City

MIAMI BEACH

FL

85

Zip Code
33162

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 signature required when reinstating)

DATE

4/27/96

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME
Rojas, Julio
STREET ADDRESS
2601 NE. 167 St. Apt. # 1
CITY-ST-ZIP
Miami Beach, FL. 33162

TITLE ☐ DELETE

NAME
Gomez, Auxiliadora
STREET ADDRESS
5975 SW.137 Ave. Casa 801
CITY-ST-ZIP
Miami Beach, FL.

TITLE ☐ DELETE

NAME
Rojas, Marbin
STREET ADDRESS
12240 SW. 2 St.
CITY-ST-ZIP
Miami, FL. 33174

TITLE ☐ DELETE

NAME
Rojas, Walter
STREET ADDRESS
2118 SW.3St. Apt. # 8
CITY-ST-ZIP
Miami, FL. 33135

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE ☐ Change ☐ Addition

NAME
Rojas, Julio
STREET ADDRESS
1645 NE. 182 St.
CITY-ST-ZIP
N. Miami Beach, FL.

2. TITLE ☒ Change ☐ Addition

NAME
Rojas, Marbin J.
STREET ADDRESS
1645 NE. 182 St.
CITY-ST-ZIP
N. Miami Beach, FL.

3. TITLE ☒ Change ☐ Addition

NAME
Rojas, Walter
STREET ADDRESS
1645 NE. 182 St.
CITY-ST-ZIP
N. Miami Beach, FL. 33162

4. TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

5. TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

6. TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

600001848626
-06/03/96--01061--041
***200.00

5/1/96

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #