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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Mar 27 1998 8:00am

Secretary of State

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P93000070700 (8)								
TILE TECH DESIGN GROUP CORP						88 24 1884 1	M	
Principal Plac	e of Business	Mailing Address				E INDUINDO IND CONDA PROPE BOARD DONN DONN DONN DANN FRANCE		FRIM BAIN HARI
8830 S.W. 123RD COURT 8800 SW 123 CT								
#1-406	••	1-406				DO NOT WRITE IN THIS S	SPACE	
MIAMI FL 33186		MIAMI FL 33186 US				3. Date Incorporated or Qualified		
						10/12/1993		
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number		Applied For
21		26		65-0469441		Not Applicable		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	- 7			5. Certificate of Status Desired	T	Additional
22								Required
23	·	28	Jity & State			6. Election Campaign Financing Trust Fund Contribution		O May Be d to Fees
Zip				ntry		8. This corporation owes or has paid the cure		
24	25	29	30				Yes	☐ No
	9. Name and Address of Current	Registered Agent				10. Name and Address of New Registered A	gent	
AAI	BSCCO INC.]'	B1	Name			
8830 S.W. 123RD COURT				B 2	Street Addre	ess (P.O. Box Number is Not Acceptable)		
#i-405				B3				
MIAMI FL 33186				63				
			F	84	City	FL	85 Zi	p Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the at office or registered agent, or both, in the State of Florida. Such change was authorized agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Stat					-named corp		changing	its registered
office or r	egistered agent, or both, in the State of m familiar with, and accept the obliga	of Florida. Such change was tions of, Section 607.0505, F	authorized Iorida Statu	by ites	the corporation	ion's board of directors. I hereby accept the appoint	ointment i	as registered
SIGNATURE								
	Signature, typed or printed name of registered ager			Ager	nt signature require	ed when reinstating) DATE		
12.	OFFICERS AND	DELETE	13.	_		ADDITIONS/CHANGES TO OFFICERS AND	DIRECTO Chance	
TITLE NAME	PD Del C Sanchez, Jose		1.1 TITU 1.2 NAM				Change	E AUGILIUII
STREET ADDRESS	8380 SW 123 CT, I-406				ADDRESS			
CITY-ST-ZIP	MIAMI FL		1.4 CIT					
TITLE	1116 4111 1 2	DELETE	2.1 TITL				Change	Addition
NAME			2.2 NAM	Æ				
STREET ADDRESS			2.3 STR	EET A	ADDRESS			
CITY-ST-ZIP			2. 4 CIT	Y-S1	r-zip			
TITLE	☐ DELETE 3			3.1 TITLE			☐ Change	Addition
NAME			3.2 NAA		1			
STREET ADDRESS	•				ADDRESS			
CITY-ST-ZIP TITLE		DELETE	3.4. CIT 4.1 TITL		I - ZIP		Change	Addition
NAME		LJ bttcit	4. 1 NA				CHOING!	7.00
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP			4.4 CITY		4			
TITLE		☐ DELETE	5.1 TITL				Change	Addition
NAME			5.2 NAN	AE.				ţ
STREET ADDRESS			5.3 STR	EET A	address			
CITY-ST-ZIP			5.4 CITY	_	- ZIP		C-11	
TITLE		DELETE	6.1 T/TL				Change	e
NAME			6.2 NAM					
STREET ADDRESS			6.3 STR	EET A	ADDRESS			

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 suppliemental minual 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 chapted, of on an attachment with any affices.