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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000049548

1		
	Principal Place of Business	Mailing Address
	3439 MARSH ROAD KISSIMMEE FL 34746	3439 MARSH ROAD KISSIMMEE FL 34746
-		

Mar 03, 1999 8:00 am Secretary of State

03-03-1999 90025 019 ***150.00

ERIC'S (CERAMIC TILE, INC.										,
Principal Place	of Business	Mailing Address						1 40 711 49 111 8 1		41641 (8) (40)	
3439 MARSH R KISSIMMEE FL		····			DO NOT WRITE IN THIS SPACE						
								E IN 1MIS 3	PACE		1
							3. Date Incorporated or Qualifed				
2 Nolling Address							07/01/1994 4. FEI Number		ΙΔn	plied For	1
2. Principal Place of Business 2a. Mailing Add			ureas				59-3275276			t Applicable	1
Suite, Apt.	# etc	Suite, Apt. #, etc.	Suite, Apt. #, etc.						\$8.75		1
22	m, 010.	27				ľ	5. Certifcate of Status Desired		Fee Re		
City & State	e	City & State					6. Election Campaign Financing		\$5.00	May Be	1
23		28					Trust Fund Contribution		Added t		
Zip	Country	Zip	Cou	ntry			8. This corporation owes the curre			_	1
24	25	29	30				Personal Property Tax.		☐ Yes	□No	-
	9. Name and Address of Currer	nt Registered Agent		041	NI.		10. Name and Address of New R	egistered A	gent		ł.
MEE	NENTUAL EDIC	.1		81	Name					_	
	DENTHAL, ERIC DIMARSH ROAD NEW A	ddress Mississippi Aue aud Fl 34769		82	Street A	et Address (P.O. Box Number is Not Acceptable)		ole)			
	SIMMEE FL 34746 507	Mississippi Aul		83					<u> </u>		1
Noc	SIVINIEL I E STI TO	nd Fl 34769		83							
	31 4	7 7 7		84 City				FL	85 Zip (Code	
44 D	4- thisin- of Section- 607 050	22 and 607 1609 Elorida Statut	ec - the al		a-named c	- COLONIA C	ation:submits this statement for the		<u> </u> hanoino its	registered	1==
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 agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.										gistered	
SIGNATURE	· Penistered	gistered Agent signature required			den reinstating)	DATE			۱,		
12.	Signature, typed or printed name of registered age OFFICERS AN	ND DIRECTORS	13.			iqui ou u	ADDITIONS/CHANGES TO OFF		DIRECTO	ORS IN 12	٤
TITLE	D	☐ DELETE	1.1 Til	TLE					Change	☐ Addition] ;
NAME	NIEDENTHAL, ERIC	99 MARSH ROAD		1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP							3
STREET ADDRESS	3439 MARSH ROAD										ן נ
CITY-ST-ZIP	KISSIMMEE FL										. }
TITLE	-	☐ DELETE	2.1 ∏	TLE	ا سرة				☐ Change	☐ Addition	1
NAME			2.2 N	ME	Ì						
STREET ADDRESS			2.3 \$7	REET	ADDRESS						
CITY-ST-Z3P		<u> </u>	2.4 C		T- ZIP				m ob		$\frac{1}{2}$
TITLE		_		3.1 TITLE					Change	Addition	
NAME		`	3.2 NAM								
STREET ADDRESS	-				ADDRESS						
CITY-ST-ZIP	<u> </u>			3.4. CITY-ST-ZIP					Change	Addition	1
TITLE			4.1 TT		· ~-	~		· · •		L,	1
NAME OTDEET ADDRESS	,		4. 2 N		TADDDESS						}
STREET ADDRESS			4.3 STREET								
CITY-ST-ZIP TITLE		☐ DELETE	4.4 CITY-ST-ZIP 5.1 TITLE		1.71				Change	Addition	1
NAME			5.2 NA						-		
STREET ADDRESS			5.3 \$7	REET	ADDRESS						
CITY-ST-ZIP			5.4 CI	TY-ST	T-ZIP		,				
TITLE		☐ DELETE		6.1 TITLE					☐ Change	☐ Addition	
NAME				6.2 NAME							
STREET APPRESS			6.3 \$1	REET	ADDRESS						

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 on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS