

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 # P95000003304 (9)

1. Corporation Name

SOUTH FLORIDA TILE & MARBLE, INC.



Principal Place of Business

Mailing Address

4101 N.W. 78TH WAY
CORAL SPRINGS FL 33065-4700

4101 N.W. 78TH WAY
CORAL SPRINGS FL 33065-4700

2. Principal Place of Business

21 5405 NW 102 Ave.

Suite, Apt. #, etc.

22 Suite 239

City & State

23 Sunrise, FL

Zip

24 33351

Country

25 Broward

2a. Mailing Address

26 5405 NW 102 Ave.

Suite, Apt. #, etc.

27 Suite 239

City & State

28 Sunrise, FL

Zip

29 33351

Country

30 Broward

9. Name and Address of Current Registered Agent

PEARSON, JAMES E
4101 N.W. 78TH WAY
CORAL SPRINGS FL 33065-4700

3. Date Incorporated or Qualified

01/11/1995

3a. Date of Last Report

4. FEI Number

65-0568097

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

10. Name and Address of New Registered Agent

81 Name Pearson, James E.

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

83 5405 NW 102 Avenue

84 Suite 239

85 City Sunrise

FL

Zip Code

33351

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 if not applicable

(Block 11 Registered Agent Signature required when recording)

(Date)

12. OFFICERS AND DIRECTORS

1. TITLE
NAME PEARSON, JAMES E
STREET ADDRESS 4101 N.W. 78TH WAY
CITY-ST-ZIP CORAL SPRINGS FL 33065-4700

2. TITLE
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STREET ADDRESS
CITY-ST-ZIP

3. TITLE
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STREET ADDRESS
CITY-ST-ZIP

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STREET ADDRESS
CITY-ST-ZIP

12. TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE
NAME Pearson, James E.
STREET ADDRESS 5405 NW 102 Avenue, Suite 239
CITY-ST-ZIP Sunrise, FL 33351

2. TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

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