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 # **P95000012420 (2)**

1. Corporation Name

NINO'S UNIVERSAL TILE & MARBLE, INC.

Principal Place of Business	Mailing Address
~~3211 PONCE DE LEON BLVD.~~ ~~SUITE 201~~ ~~MIAMI FL 33134~~	~~3211 PONCE DE LEON BLVD.~~ ~~SUITE 201~~ ~~MIAMI FL 33134~~

3. Date Incorporated or Qualified: 02/14/1995
3a. Date of Last Report:

2. Principal Place of Business
21: 138 N Federal Hwy
22: Suite, Apt. #, etc.
23: City & State: DANIA FLA
24: Zip: 33004
25: Country: USA

2a. Mailing Address
26: 138 N Federal Hwy
27: Suite, Apt. #, etc.
28: City & State: DANIA FLA
29: Zip: 33004
30: Country: USA

4. FEI Number: 65-0554456 ☐ 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

NEWMAN, BRUCE
3211 PONCE DE LEON BLVD.
SUITE 201
MIAMI FL 33134

10. Name and Address of New Registered Agent

81 Name:
82 Street Address (P.O. Box Number is Not Acceptable): 9595 N. KENDALL DR. Suite 205
83:
84 City: MIAMI **FL** 85 Zip Code: 33176

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 of new registered agent, if applicable) (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ~~IGNORATO, GAETANO~~ ~~2700 N. 34TH AVE., TOWN HOME EAST~~ ~~HOLLYWOOD FL 33021~~ ☒ DELETE	11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY-ST-ZIP	DIRECTOR / V.P. JONATHAN WEINSTOCK 2700 NORTH 34TH AVE TOWN HOME E HOLLYWOOD, FL. 33021 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY-ST-ZIP	PRESIDENT/ PRESIDENT. GAETANO, IGNORATO. 637 OLEANDER DRIVE. HALLANDALE, FL. 33009 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY-ST-ZIP	☐ Change ☐ Addition

CR2E034 (12/95)

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: J. Weinstock V. WEINSTOCK 3/6/96 305 9221818

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #