

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Morham

Secretary of State

OFFICE OF CORPORATIONS

1996-29-96

b-1684

DOCUMENT # P95000014906 (8)

1. Corporation Name

AFFILIATED CERAMICS, INC.



Principal Place of Business

1001 E. OCEAN BLVD.
SUITE 106
STUART FL 34996

Mailing Address

1001 E. OCEAN BLVD.
SUITE 106
STUART FL 34996

2. Principal Place of Business

2a. Mailing Address

21. 169 TEQUESTA

26. 169 TEQUESTA

State, Apt. #, etc.

State, Apt. #, etc.

22. 22E

27. 22E

City & State

City & State

23. TEQUESTA, FLORIDA

28. TEQUESTA, FLORIDA

Zip Country

Zip Country

24. 33469

25. USA

29. 33469

30. USA

9. Name and Address of Current Registered Agent

3. Date Incorporated or Chartered
02/21/1995

3a. Date of Last Report

4. FEI Number
65-0546150

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

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

83.

84. City

FL

85. Zip Code

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 607.0508, Florida Statutes.

SIGNATURE

X Kerry A. Ry...

2-22-96

(Date)

12. OFFICERS AND DIRECTORS

1. NAME
BOUCHER, ROBERT F
2. STREET ADDRESS
169 TEQUESTA DRIVE, SUITE 22E
3. CITY, ST, ZIP
TEQUESTA FL 33469

4. NAME
D
5. STREET ADDRESS
KAPALKO, KERRY A
1001 E. OCEAN BLVD.
6. CITY, ST, ZIP
STUART FL 34996

7. NAME
D
8. STREET ADDRESS
KAPALKO, KERRY A
1001 E. OCEAN BLVD.
9. CITY, ST, ZIP
STUART FL 34996

10. NAME
D
11. STREET ADDRESS
KAPALKO, KERRY A
1001 E. OCEAN BLVD.
12. CITY, ST, ZIP
STUART FL 34996

13. NAME
D
14. STREET ADDRESS
KAPALKO, KERRY A
1001 E. OCEAN BLVD.
15. CITY, ST, ZIP
STUART FL 34996

16. NAME
D
17. STREET ADDRESS
KAPALKO, KERRY A
1001 E. OCEAN BLVD.
18. CITY, ST, ZIP
STUART FL 34996

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(5)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplement's 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 treasurer or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Book 12 or Book 13 if changed, or on an attachment with an address.

SIGNATURE:

X Kerry A. Ry...
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-22-96 407 286-9035

CR2E034 (12/95)