## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)



**PROFIT** CORPORATION **LANNUAL REPORT** 

1997



## FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000018661 (5)

BECK'S TILE & MARBLE, INC.

Principal Place of Business

Mailing Address

FILED 97 SEP 17 PM 3: 03

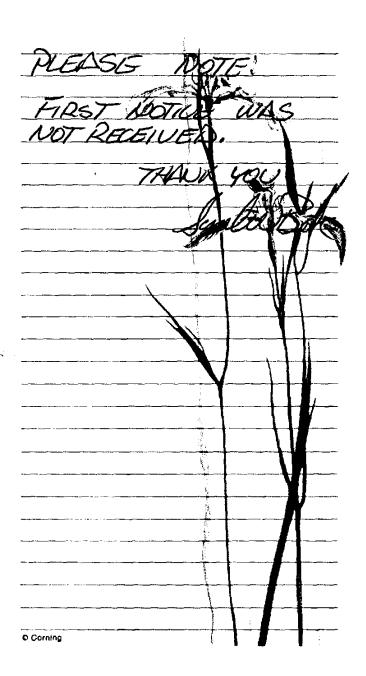
SECRETARY OF STATE TALLAHASSEE, FLORIDA



DELRAY BEA			1711 FERN FOREST PL DELRAY BEACH FL 33445							
						DO NOT WRITE IN THIS SPACE				
						3. Date Incorporated or Qualified	3a. Date of	Last Re	eport	
						03/03/1995	09/09	/1996		
2. Principal Place of Business 2a. Mailing Address						4. FEI Number		Ар	plied For	
21 17/1 P	PROFORT NC	26				65-0560137		No	t Appl cable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	□ \$	8.75 △	dditional	
22		27				<b>6.</b> Certificate of Status Desired		Fee Re	quired	
City & State	9	City & State				6. Election Campaign Financing	9	5.00	May Bo	
23		28				Trust Fund Contribution				
Žip	Country	Zip	Zip Country			8. This corporation owes or has paid the current year Intangible				
24	25	29	30			Personal Property Tax due June 30.				
	9. Name and Address of Curren	it Registered Agent	itered Agent			10. Name and Address of New Registered Agent				
RE	CK; SAM			81	Name					
1711 FERN FOREST PL										
				82	Street Add	Address (P.O. Box Number is Not Acceptable)				
UE	LRAY BEACH FL 33445		-	83	<del></del>					
				ا ت						
				84	City		<b>—.</b> 85	Zip C	Code	
							<u> </u>			
11. Pursuant t	o the provisions of Sections 607.050 enistered agent, or both, in the State	2 and 607.1508, Florida 8 of Florida, Such change:	Statutes, the at was authorized	oove Lbv	enamed co ≀the corpor	rporation submits this statement for the praticul's board of directors. I hereby accept	urpose of cha	nging its	s registered	
agent. I ar	n familiar with, and accept the obliga	ations of, Section 607.050	5, Florida Stat	ules	s.	ation's board of directors. I hereby accep	т по арроппп	ioni as i	ogisie ico	
SIGNATURE										
0.0.0.000	Signature, typod or printed name of registered age	of and the if soptemble	(NOTE Registered	i Age	nt signature req	julred when reinstating)	DATE			
12.	OFFICERS ANI	D DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC	ERS AND DIF	ECTORS	S IN 12	
TITLE	P	. 🔲 DELET	E 1.1 TH	t E				Change	Addition	
NAME	BECK, SAMUEL		1.2 N							
STREET ADDRESS	1711 FERN FOREST PL		1.3 STREET ADDRESS						- 1	
CITY-ST-ZIP	<b>DELRAY BEACH FL 33445</b>			.4 C/1Y-S1-ZIP					ĺ	
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TITLE		☐ DELETI					Ш	Change	Addition	
NAME			3.2 NA							
STREEFADDRESS			3.3 \$1	REE1	ADDRESS					
CITY CT-ZIP			3.4. CI		31 - <b>Z</b> IP					
TITLE		DELETI	4.1 117	LΕ				Change	noitibtA 🔲	
NAME			4.2 N/	4M£						
STREET ADDRESS			4.3 ST	REE1	ADDRESS					
CITY-ST-ZIP		1	4.4 CIT	[Y - S	1 - Z(P					
TITLE			5.1 7/1LE					Change	Addition	
NAME			5.2 NA							
STREET ADDRESS					ADDRESS		//	$\leq \mathcal{M}$		
CITY-ST-ZIP					1		1	$\chi/1$		
TITLE		DELETI	5.4 CIT 6.1 TIT		1-515		/px/	#/	☐ Addition	
		בן טנננוו					149	7	LI NOGIDON L	
NAME			6.2 NA				IV	V		
STREET ADDRESS			6.3 ST	REET	ADDRESS			•		

6.4 CITY - ST- ZIP 14. I do 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 annual report is true and accurate and that my signature shall have the same legal offect 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 change ti, or on an applichment with an address.

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