

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

REINSTATEMENT

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000028997 (1)

1. Corporation Name

BAY TILE AND MARBLE INC.

97 JAN -6 AM 8:16

SECRETARY OF STATE
TALLAHASSEE FLORIDA



REINSTATEMENT

9600

Principal Place of Business Mailing Address
2300 TALL PINES DR., SUITE 125 2300 TALL PINES DR., SUITE 125
LARGO FL 34641 LARGO FL 34641

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 P.O. Box 2467
22 City & State 27 Suite, Apt. #, etc.
23 City & State 28 LARGO FL
24 Zip Country 29 33779 30 U.S.A.

3. Date Incorporated or Qualified 3a. Date of Last Report
04/07/1995
4. FEI Number ☒ Applied For
Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required
6. Election Campaign Financing ☐ \$5.00 May Be
Trust Fund Contribution 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
CHRISTOPOULOS, SOTIRIOS
2300 TALL PINES DR., SUITE 125
LARGO FL 34641

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 607.1503, 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 obligation of Section 607.0505, Florida Statutes.

SIGNATURE *[Signature]* (NOTE: Registered Agent signature required when reinstating) DATE 12/31/96

12. OFFICERS AND DIRECTORS
TITLE NAME STREET ADDRESS CITY-ST-ZIP
1. CEO CHRISTOPOULOS, SOTIRIOS 2300 TALL PINES DR., SUITE 125 LARGO FL 34641
2. SD CHRISTOPOULOS, SOTIRIOS 2300 TALL PINES DR., SUITE 125 LARGO FL 34641
3. PT DOUNLIAS, GEORGE 2300 TALL PINES DR., SUITE 125 LARGO FL 34641
4. ☐ DELETE
5. ☐ DELETE
6. ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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***1125.00 ***375.00

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 617, Florida Statutes; and that my name appears in block 13 if changed, or on an attachment with an address.

SIGNATURE *[Signature]* DATE 12/31/96

CR2E034 (3/96)