

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P95000028997 (1)

1. Corporation Name

BAY TILE AND MARBLE INC.

FED ID # 593308746

Principal Place of Business

Mailing Address

P.O. BOX 2467
LARGO FL 33778

P.O. BOX 2467
LARGO FL 33778-2467

FILED

97 JUL 10 AM 8:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



2. Principal Place of Business

21 2481 McMullen Booth Rd.

Suite, Apt. #, etc.

22

City & State

23 CLEARWATER FL

Zip

24 34619

Country

2a. Mailing Address

26 2481 McMullen Booth Rd.

Suite, Apt. #, etc.

27

City & State

28 CLEARWATER FL

Zip

29 34619

Country

30

9. Name and Address of Current Registered Agent

CHRISTOPOULOS, SOTIRIOS
1300 TALL PINES DR., SUITE 125
LARGO FL 34641

3. Date Incorporated or Qualified

04/07/1995

3a. Date of Last Report

01/06/1997

4. FEI Number

APPLIED FOR

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

GEORGE DOUKLIAS

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

2481 McMullen Booth Road

83

84 City

CLEARWATER

FL

85 Zip Code

34619

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]
Signature of registered agent and title if applicable

ID # 593308746

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME CEO

STREET ADDRESS CHRISTOPOULOS, SOTIRIOS

CITY-ST-ZIP 2300 TALL PINES DR., SUITE 125

LARGO FL 34641

TITLE ☐ DELETE

NAME SD

STREET ADDRESS CHRISTOPOULOS, SOTIRIOS

CITY-ST-ZIP 2300 TALL PINES DR., SUITE 125

LARGO FL 34641

TITLE ☐ DELETE

NAME PT

STREET ADDRESS DOUKLIAS, GEORGE

CITY-ST-ZIP 2300 TALL PINES DR., SUITE 125

LARGO FL 34641

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

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

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 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:

[Signature]
4/30/97

CR2E034 (9/96)