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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham .

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

P95000062464 (9)

BMI TILE, INC.

Principal Place of Business	Mailing Address
676 W PROSPECT ROAD FT LAUDERDALE FL 33309	676 W PROSPECT ROAD FT LAUDERDALE FL 33309
2. Principal Place of Business	2a. Mailing Address

FILED Jun 04 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/14/1995 4. FEI Number Applied For 65-0608497 Not Applicable Sulte, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing \Box 23 Trust Fund Contribution Added to Fees 28 Zip Country Country 8. This corporation owes or has paid the current year intengible Yes No 24 Personal Property Tax due June 30. 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name SAHAGIAN, GEORGE 676 W PROSPECT ROAD 82 Street Address (P.O. Box Number is Not Acceptable) FT LAUDERDALE FL 33309 83 City Zip Code 85 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, typed or punied name of registered agent and title it appacable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change DELETE 1 1 TITLE Addition SAHAGIAN, GEORGE 1.2 NAME

SIGNATURE 12 CR2E034 (10/97 TITLE NAME **676 W PROSPECT ROAD** STREET ADDRESS 1.3 STREET ADDRESS FT LAUDERDALE FL 33309 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.11016 NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Change Addition 31 THILE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-ZIP DELETE Addition 4.1 TITLE TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-\$1-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 City-St-ZiP CITY-ST-ZIP Change Addition DELETE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

14. Thereby 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 supplied 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 of trust open powerents execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 of changed, or on the receiver of the corporation of the corporation of the corporation of the receiver of the corporation of the corporat

SIGNATURE:

4.29.98