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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000093297 (6)

LES ARTHUR'S BRICK & TILE, INC.

Principal	Place of	Business

Mailing Address

FILED Mar 20 1998 8:00am Secretary of State



661 E. GEORGIA AVENUE 661 E. GEORGIA AVENUE LONGWOOD FL 32750 LONGWOOD FL 32750 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/01/1996 Applied For 2a. Mailing Address FEI Number 2. Principal Place of Business Not Applicable 59-3350728 21 26 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. Ø 5. Certificate of Status Desired Fee Required 27 22 City & State City & State \$5.00 May Be 6, Election Campaign Financing Added to Fees Trust Fund Contribution 23 28 Country Zip Country This corporation owes or has paid the current year intangible Zip Personal Property Tax due June 30. Yes 30 24 29 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name ARTHUR, LESUE P 661 E. GEORGIA AVENUE Street Address (P.O. Box Number is Not Acceptable) 82 LONGWOOD FL 32750 83 84 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 Signature, typed or printed name of registered agent and tille if applicable. (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Change Addition DELETE 1.1 TITLE TITLE arthur, leslie p 1.2 NAME NAME 661 E. GEORGIA AVENUE 1.3 STREET ADDRESS STREET ADDRESS LONGWOOD FL 32750 1.4 CITY-ST-ZIP CITY-ST-ZIP Addition DELETÉ ☐ Change 2.1 TITLE TITLE ARTHUR, TERRY A 2.2 NAME NAME **661** E. GEORGIA AVENUE 2.3 STREET ADDRESS STREET ADDRESS LONGWOOD FL 32750 2. 4 CITY-ST-ZIP CITY-ST-ZIF DELETE ☐ Change ___ Addition 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS CHY-ST-ZIP 3.4. CITY - ST-ZIP DELETE ___ Change Addition 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Addition Change DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP Addition DELETE 6.1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP

14. I 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 of 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 altachment with an address.

D n H

14-08 (407)260-13

CR2E034 (10/97)