

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # P95000095643 (9)

1. Corporation Name

CERAMIC DESIGNS OF JUPITER, INC.



Principal Place of Business

5451 SHIRLEY DRIVE  
JUPITER FL 33458

Mailing Address

5451 SHIRLEY DRIVE  
JUPITER FL 33458

3. Date Incorporated or Qualified  
12/19/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 500 N Old Dixie Highway

26 500 N Old Dixie Highway

4. FEI Number  
65-0629742

Applied For  
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Suite # 3

27 Suite # 3

City & State

City & State

23 Jupiter, FL

28 Jupiter, FL

Zip

Country

Zip

Country

24 33458

25

29 33458

30

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

POSNER, MICHAEL J ESQ.  
1555 PALM BEACH LAKES BLVD. STE 1000  
WEST PALM BEACH FL 33401

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 607.1508, 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 the corporation, and the Registered Agent's signature and registration number.

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
President  
Bobby Roberts  
500 N. Old Dixie Hwy Ste 3  
Jupiter, Fla 33458

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

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

☐ Change ☐ Addition

1. TITLE  
2. NAME  
3. STREET ADDRESS  
4. CITY - ST - ZIP  
☐ Change ☐ Addition

2. 1. TITLE  
2. NAME  
3. STREET ADDRESS  
4. CITY - ST - ZIP  
☐ Change ☐ Addition

3. 1. TITLE  
2. NAME  
3. STREET ADDRESS  
4. CITY - ST - ZIP  
☐ Change ☐ Addition

4. 1. TITLE  
2. NAME  
3. STREET ADDRESS  
4. CITY - ST - ZIP  
☐ Change ☐ Addition

5. 1. TITLE  
2. NAME  
3. STREET ADDRESS  
4. CITY - ST - ZIP  
☐ Change ☐ Addition

6. 1. TITLE  
2. NAME  
3. STREET ADDRESS  
4. CITY - ST - ZIP  
☐ Change ☐ Addition

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 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Business Purpose

CR2E034 (12/95)