

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

FILED

Apr 15 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # P96000012881 (4)

1. Corporation Name

TUSCANY STONE SURFACES, INC.



Principal Place of Business

4528 PRAIRIE AVE  
MIAMI BEACH FL 33140  
US

Mailing Address

4528 PRAIRIE AVE  
MIAMI BEACH FL 33140  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/09/1996

4. FEI Number

65-0675062

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 owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☒ Yes ☐ No

21. Principal Place of Business  
1594 NW 159 ST

Suite, Apt. #, etc.

22. City & State

MIAMI FL

24. Zip

33169

Country

DOGE

26. Mailing Address

1594 NW 159 ST

Suite, Apt. #, etc.

27. City & State

MIAMI FL

29. Zip

33169

Country

DOGE

9. Name and Address of Current Registered Agent

ZIMMERMAN, HOWARD  
4528 PRAIRIE AVENUE  
MIAMI BEACH FL 33140

10. Name and Address of New Registered Agent

81. Name

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

1594 NW 159 ST

83. City

MIAMI

84. State

FL

85. Zip Code

33169

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

*Howard Zimmerman*

Signature of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

Howard Zimmerman REGO 4/8/98

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME PD

STREET ADDRESS ZIMMERMAN, LEE

CITY-ST-ZIP 4528 PRAIRIE AVENUE

MIAMI BEACH FL 33140

TITLE ☐ DELETE

NAME D

STREET ADDRESS POLVANI, GUISEPPE

CITY-ST-ZIP VIALE FRATELLI ROSSELLI, 11/R

50144 FRIENZE, ITALY

TITLE ☐ DELETE

NAME S

STREET ADDRESS ZIMMERMAN, HOWARD

CITY-ST-ZIP 4528 PRAIRIE AVENUE

MIAMI BEACH FL 33140

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

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☒ Change ☐ Addition

4000 TOWERSIDE TERRACE 1701  
MIAMI FL 33138

☐ Change ☐ Addition

4000 TOWERSIDE TERRACE 1701  
MIAMI FL 33138

☒ Change ☐ Addition

4000 TOWERSIDE TERRACE 1701  
MIAMI FL 33138

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

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 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

*Howard Zimmerman*

Howard Zimmerman REGO 3/16/98

CR2E034 (10/97)