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

## CORPORATION ANNUAL REPORT 1998 DOCUMENT # 1. Corporation Name



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## P96000015898 (5) UNITED TILE & STONE, INC.

Mailing Address 100 SECOND AVE S

**FILED** Mar 16 1998 8:00am Secretary of State



Principal Place of Business 5502 ANDERSON RD TAMPA FL 33634 SUITE 704 DO NOT WRITE IN THIS SPACE ST PETERSBURG FL 33701 3. Date Incorporated or Qualified 02/12/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 5502 Anderson 59-3362354 21 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing ヒ 23 Trust Fund Contribution Added to Fees Janpa Zip Country Country 8. This corporation owes or has paid the current year Intangible ☐ Yes 24 30 Personal Property Tax due June 30. g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent A1 Name LOCICERO, CINDY L 100 SECOND AVE S 82 Street Address (P.O. Box Number is Not Acceptable) SUITE 704 вэ ST PETERSBURG FL 33701 84 City 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 protect name of registered would and title if application (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. TITLE DELETE 1.1 TITLE Change Addition PLAZZA, MARIO NAME 1.2 NAME 5502 ANDERSON RD STREET ADDRESS 1.3 STREET ADDRESS TAMPA FL CFTY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE NAME 22 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3 3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Addition Change TITLE 4.1 TITLE NAME 4 2 NAME

6.4 CITY-ST-ZIP 14. Thereby certify that the information supplied with this filling 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 trusted 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 attrictment with an address.

4.3 STREET ADDRESS

5.3 STREET ADDRESS 5.4 CiTY-ST-ZiP

6.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE 5.2 NAME

6.1 TITLE

62 NAME

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

TITLE

NAME STREET ADDRESS

TITLE

NAME

CITY-ST-ZIP

STREET ADDRESS

Mano & Ploys

DELETE

DELFTE

3-10.98 8/3-884-2382

Change

Change

Addition

Addition