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Jan 30, 1999 8:00am
Secretary of State

01-30-1999 90008 046 ***150.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000018987

1. Corporation Name

DEBRON'S CERAMIC TILE, INC.

Principal Place of Business

17708 WENDY SUE AVE
HUDSON FL 34667

Mailing Address

17708 WENDY SUE AVE
HUDSON FL 34667

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/28/1996

4. FEI Number

59-3368414

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 the current year Intangible
Personal Property Tax.

☒ Yes ☒ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

9. Name and Address of Current Registered Agent

SCHWARTZ, RONALD L
DEB 17708 WENDY SUE AVE, INC.
HUDSON FL 34667

10. Name and Address of New Registered Agent

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

Ronald L. Schwartz
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

1/12/99

12. OFFICERS AND DIRECTORS

TITLE P
NAME SCHWARTZ, RONALD L.
STREET ADDRESS 17708 WENDY SUE AVE
CITY-ST-ZIP HUDSON FL

☐ DELETE

TITLE VP
NAME SCHWARTZ, DEBRA
STREET ADDRESS 17708 WENDY SUE AVE.
CITY-ST-ZIP HUDSON FL

☐ DELETE

TITLE S
NAME SCHWARTZ, RONALD L.
STREET ADDRESS 17708 WENDY SUE AVE
CITY-ST-ZIP HUDSON FL

☐ DELETE

TITLE T
NAME SCHWARTZ, DEBRA
STREET ADDRESS 17708 WENDY SUE AVE
CITY-ST-ZIP HUDSON FL

☐ DELETE

TITLE P
NAME SCHWARTZ, RONALD L.
STREET ADDRESS 17708 WENDY SUE AVE
CITY-ST-ZIP HUDSON FL

☐ DELETE

TITLE P
NAME SCHWARTZ, RONALD L.
STREET ADDRESS 17708 WENDY SUE AVE
CITY-ST-ZIP HUDSON FL

☐ DELETE

13.

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ 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, with all other like empowered.

SIGNATURE

Ronald L. Schwartz
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/12/99 727-868-8506

CR2E034 (1/1/98)