

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

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Mar 24 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P96000025780 (3)**

1. Corporation Name

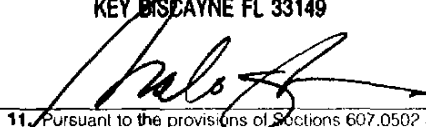
**KEY BISCAIYNE TILE CRAFT, INC.**



Principal Place of Business <b>104 CRANDON BLVD STE 303 KEY BISCAIYNE FL 33149</b>	Mailing Address <b>104 CRANDON BLVD STE 303 KEY BISCAIYNE FL 33149</b>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 <b>Suite Apt. #, etc.</b> 22 <b>313</b> 23 City & State 24 Zip 25 Country		2a. Mailing Address 26 <b>Suite Apt. #, etc.</b> 27 <b>313</b> 28 City & State 29 Zip 30 Country		3. Date Incorporated or Qualified <b>03/19/1996</b>	
				4. FEI Number <b>65-0579750</b> Applied For <input type="checkbox"/> Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent <b>BALOGH, ARTHUR W JR 250 SUNRISE DRIVE APT F KEY BISCAIYNE FL 33149</b> 				10. Name and Address of New Registered Agent 81 Name <b>Balogh, Arthur W.</b> 82 Street Address (P.O. Box Number is Not Acceptable) <b>104 Crandon Blvd.</b> 83 <b>Suite 313</b> 84 City <b>Key Biscayne</b> FL 85 Zip Code <b>33149</b>			
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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 title if applicable.


(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP
	<b>P VALENTINE, JOHN</b>	<b>55 OCEAN DR. #1031</b>	<b>55 Ocean Lane Dr. #1031 KEY BISCAIYNE FL 33149</b>	<input type="checkbox"/> DELETE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY-ST-ZIP
	<b>S BALOGH</b>	<b>BALOGH, ARTHUR J</b>	<b>250 SUNRISE DR. F</b>	<input type="checkbox"/> DELETE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
			<b>104 Crandon Blvd. Suite 313 KEY BISCAIYNE FL 33149</b>				
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY-ST-ZIP
				<input type="checkbox"/> DELETE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY-ST-ZIP
				<input type="checkbox"/> DELETE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY-ST-ZIP
				<input type="checkbox"/> DELETE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY-ST-ZIP
				<input type="checkbox"/> DELETE	<input type="checkbox"/> Change <input type="checkbox"/> 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:

 **ARTHUR W. BALOGH, JR.** 3.17.98.

CR2E034 (10/97)