Applied For Not Applicable \$8.75 Additional Fee Required \$5.00 May Be Added to Fees

☐ No

FILED

Jul 21, 1999 8:00 am

**Secretary of State** 

07-21-1999 90001 030 \*\*\*550.00

PROFIT CORPORATION ANNUAL REPORT

1999

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

GAY KANUTH TILE & DESIGN, INC.

FLORIDA-LAWDOCK, INC.

222 LAKEVIEW AVENUE **FOURTH FLOOR** 

301 53RD STREET UNIT D WEST PALM BEACH FL 33407		UNIT D West Palm Beach FL 33407		DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified 05/03/1996	
2. Principal Place of Business		2a. Mailing Address		4. FEI Number 65-0668092	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.7 Fe
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution	<b>\$5.</b> Add
Zip	Country 25	Zip 29	Country 30	This corporation owes the current year Intangible Personal Property.	Yes
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	

Mailing Address

WEST PALM BEACH FL 33402 Zip Code 84 City 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.

82

83

Name

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

SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. TITLE DELETE 1.1 TITLE Change Addition KANUTH, GAY 1.2 NAME NAME 301 53RD STREET, UNIT D 1.3 STREET ADDRESS STREET ADDRESS WEST PALM BEACH FL 33407 1.4 CITY-ST-ZIP CITY-ST-ZIP 21 TITLE Change Addition TITLE DELETE 22 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 3.1 TITLE Change Addition TITI F 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 CITY-ST-ZIP CITY-ST-ZiP DELETE 4.1 TITLE \_\_\_Change Addition TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP 5.1 TITLE DELETE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP 6.1 TITLE Change Addition TITLE DELETE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP

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 supplied ental 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 porths received 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 only analyzing with an address. new with an add

SIGNATURE: X

(26/6)CR2E034