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

PROFIT CORPORATION **ANNUAL REPORT**

1**9**98



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000074674 (8)

A TOUCH OF TILE, INC. Principal Place of Business Mailing Address 1112 S4TH STREET NORTH 1112 34TH STREET NORTH ST. PETERSBURG FL ST. PETERSBURG FL DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/05/1996 2, Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 59-3404794 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. T Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 HINTENBERGER, FRED 5201 DARTHMOUTH AVENUE NORTH 82 Street Address (P.O. Box Number is Not Acceptable) ST. PETERSBURG FL 33710 83 84 City Zip Code 11. Pursuant to the provisions of Soctions 607 0502 and 607.1508, Florida Statutos, 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 Socion 607.0505, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE GEORGE HINTENBERGIRL Change 11 TITLE 👂 TITLE MANTER, TOM-NAME 12 NAME 3457 ROLLING TRAIL STREET ADDRESS 1.3 STREET ADDRESS PALM HARBOR FL 34684 CITY-ST-ZIP 1.4 CITY-ST-ZIP TITLE Change Addition 2.1 TITLE VP LOUNG CHAU MANTER, MOLLY 2.2 NAME 1116-84TH STREET NORTH STREET ADDRESS 2.3 STREET ADDRESS ST. PETERSBURG FL 33713 CITY ST-ZIP 2.4 CITY-ST-ZIP ☐ Change ☐ DELETE 3.1 TITLE Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 34. CITY-ST-ZIP DELETE Change Addition 4.1 TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST-ZIP DELETE TITLE 5.1 TITLE Change Addition 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS

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 supplience ital 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.

5.4 CITY - ST - ZIP

6.3 STREET ADDRESS

61 TITLE

6.2 NAME

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

NAME

☐ DELÉTE

Change

___ Addition

FILED

May 11 1998 8:00am

Secretary of State