SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Sep 25 1997 8:00am

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DOCUMENT # P96000082906 (4) CORNELL BROS. TILE INC													
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7628 PANTHER CT.				7628	7628 PANTHER CT.								
ORLANDO FL 32822				ORLANDO FL 32822					DO NOT WRITE	E INI TUIO C	ים א מר		
1								3	Date Incorpor	ated or Qualified		te of Last Re	anort -
								5.	10/04/199	•	Jul. 24		
2. Principal Place of Business				2a. Ma	2a. Mailing Address			4.	FEI Number			Ap	plied For
21					26				<u> 59- 3</u>	3401811			t Applicable
22	Suite, Apt. #, etc.				Suite, Apt. #, etc.				5. Certificate of Status Desired				
	City & State	e .		·	City & State			1	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
	Zip					Count	ry		This corporation owes or has paid the current year Intangit				
24	24 25			29					Personal Property Tax due June 30. Yes No				
<u> </u>				f Current Registere	d Agent		41 Name		Name and A	dress of New Ro	gistered A	gent	
			NJAMIN S			В	1 Name	• 					
۸.		28 PANTHE			8	2 Street	Address (P.	O. Box Numb	er is Not Accepta	ole)			
1	ORLANDO FL 32822						3	·					
•							A 0':					11	
							4 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 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 a													s registered
	agent. i a	m familiar w	ith, and accept t	he obligations of, Se	ofion 607.0505, F	lorida Statut	95.	iporation's pi	bard of dilect	AS. I Hereby acce	рі іне аррс	minimonicas	registered
SIG	NATURE	Signalura 1 mas	A or printed name of u	gistored agent and title if app	Loopie (NC	NI - Finaistared A		re required when	coloratations.		DATE		
12.		Olghalare, typec		ERS AND DIRECTO		13.	gera signatur		ODITIONS/CL	ANGES TO OFFI		DIRECTOR	S IN 12
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	-ST-7(P					6.4 City							

14. Ido hereby 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 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.

1407-277-786