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

**PROFIT CORPORATION ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

U.S.A. CERAMICS MFG., CORP.

1998 DOCUMENT #
1. Corporation Name P97000006712 (8)

**FILED** Apr 13 1998 8:00am Secretary of State



Principal Place of Business Mailing Address				A MOLIGIAL TIM LANIT MOLI GOLLI OCCIN	BARK BAKA MILIN INDBA NAGA NIGA MAT
4335 EAST 10 AVENUE 4335 EAST 10 AVENUE					
HALEAH FL 33013		HIALEAH FL 33013		DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	I ITIIO STACE
				01/23/1997	
2. Principal P	Place of Business	2a. Mailing Address		4. FE Number	Applied For
26		26		(65-0728328.	Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.				\$8.75 Additional	
22 27			Certificate of Status Desired	Fee Required	
City & State City & State			6. Election Campaign Financing	\$5.00 May Be	
Zip Country		28		<del></del>	Added to Fees
24	25	<b>Z</b> ip <b>29</b>	Country 30	8. This corporation owes or has paid	
291	9. Name and Address of Curr		30	Personal Property Tax due June 30  10. Name and Address of New Regis	
PONCE, THOMAS A 81 Nam					
16812 N.W. 83 AVENUE			700 000000	Jorg AMORE	
MIAMI LAKES FL 33016			82 Street Add	ross (P.O. Box Number is Not Agceptable)	he.
			83		
	₹/ . <b>/</b>		24 00		
يع	huncherf		84 City	Hiplush	FL   85   3950/3
11. Pursuant 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 from to 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 of the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE SILLUSIA.					
			Registered Agent signature requ		DATE
12.	OFFICERS A	AND DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFICER	A
NAME	PONCE, THOMAS A	Detteri	1.1 TITLE	JOLGE AMON	Change Addition
STREET ADDRESS	16812 N.W. 83 AVENUE	•	1.2 NAME 1.3 STREET ADDRESS	4335 E 10 A	ve
CITY-ST-ZIP	MIAMI LAKES FL 33016		1.4 CITY-ST-ZIP	this set	ve 33013
TITLE	VD	DELETE	21 TITLE	TIMINE P	☐ Change ☐ Addition
NAME	HERNANDEZ, TANIA		2.2 NAME	•	
STREET ADDRESS	630 WEST 17 STREET		2.3 STREET ADDRESS		
CITY-ST-ZIP	HIALEAH FL 33010		2 4 CITY-ST-ZIP		
TITLE		☐ DELETE	3.1 THLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3 4, CITY+ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		[ ] priett	4.4 CITY - ST - ZIP		
TITLE		DELETE	5.1 TITLE		Change  Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	5.4 CITY-ST-ZIP 6.1 TITLE		Change Addition
NAME			6.1 IIILE 6.2 NAME		
STREET ADDRESS			6.2 NAME 6.3 STREET ADDRESS		
CITY-ST-ZIP					
	portify that the information augusted	(1.5) 4(1.4)	6.4 CITY - ST - ZIP	Soction 110 07/2\(\text{i}\) Elected State on 1 for	

Indicated on this annual report or supplied with this tiling does not quality 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 intal 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 orthogological control or trusted employed the corporation orthogological control or trusted employed in the corporation orthogological control orthog

SIGNATURE:

7692903