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

PROFIT CORPORATION ANNUAL REPORT

1998

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

**FILED** 

Apr 24 1998 8:00am

Secretary of State

Change

■ Addition

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P97000010885 (6)

CARPET + TILE TILE TILE, INC.

Principal Plan	of During	Market Andrews						
Principal Place of Business		Mailing Address						IIFF GEN I I I I I
14486 MILITARY TRAIL DELRAY BEACH FL 33445		14466 MILITARY TRAIL DELRAY BEACH FL 33445		DO NOT WRITE IN THIS:	DACE.			
						3. Date Incorporated or Qualified	SPACE	
						'		
2. Principal Place of Business 2a. Mailing A			Address			02/04/1997 4. FEI Number	<del>/.</del>	
21		26				4. FERMANDO	h	pplied For ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.						Additional
22		27				5. Certificate of Status Desired	<b>+</b>	equired
City & Stat	le	City & State				6. Election Campaign Financing		May Be
23		28				Trust Fund Contribution		to Fees
Zip Country		Zip	<del></del>		<del></del>	8. This corporation owes or has paid the cur		
24	25	29	30					] No
Name and Address of Current Registered Agent						10. Name and Address of New Registered	Agent	
IA:	ZZARINO-OWENS, ADELE			31	Name			
14466 MILITARY TRAIL			5	32	Street Addres	ss (P.O. Box Number is Not Acceptable)		
DELRAY BEACH FL 33445			(	^	Ollobt Addio	33 (1.0. Dox Nathber is Not Acceptable)		
			83					
			-	84 City 85 Zip Cc			Codo	
					,	FL		
I Office of the	to the provisions of Sections 607.050 egistered agent, or both, in the State or familiar with, and accept the oblig	e of Florida. Such chande was	i authorized	tiv I	the comporatio	oration submits this statement for the purpose of on's board of directors. I hereby accept the app	changing it ointment as	ts registered registered
SIGNATURE								
Signature, typed or printed nume of registered agent and it that applicable				Адоп	f signature required			
12.	OFFICERS AND DIRECTORS 1					ADDITIONS/CHANGES TO OFFICERS AND		
' '	<u> </u>			1.1 TITLE			☐ Change	Addition
NAME LAZZARINO-OWENS, ADELE				1.2 NAME				
STREET ADDRESS 14466 MILITARY TRAIL		•		1.3 STREET ADDRESS				
CITY-ST-ZIP TITLE	DELRAY BEACH FL 33445			1.4 CITY - ST - ZIP 2.1 TITLE			<u> </u>	1 1480
NAME							] Change	☐ Addition
STREET ADDRESS	OWENS, RAYMOND 14466 MILITARY TRAIL		2.2 NAM		DEBEGG			
***************************************			2.3 STRE					
CITY-ST-ZIP TITLE			2. 4 CITY 3.1 TITE		- CIP		Change	Addition
NAME		L.J DECEIL	3.2 NAM				change	
STREET ADDRESS				_	DDOCCO			
CITY-ST-ZIP			3.3 STRE		·			
TITLE			3.4. CITY 4.1 TiTLE		· ZIP		Change	Addition
NAME			4.1 HILE					ריי אינייטיי
STREET ADDRESS	<b>.</b>		4. 2 NAN 4.3 STRE	-	DODLES			ľ
CITY-ST-ZIP	- · ·							
TITLE			4.4 CITY 5.1 TITLE		ZIP		Change	Addition
NAME			5.2 NAM				LL CHANGE	Addition
STREET ADDRESS			5.2 NAM 5.3 STRE		DOBESS			

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(r), Florida Statutes. I further certify that the information indicated on this annual report or suppliemental 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 trusted 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 implicatement with an address

5.4 CITY - ST - ZIP

6.3 STREET ADDRESS 6.4 City-St-Zip

6.1 TITLE

6.2 NAME

DELETE