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

PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE

FILED Apr 24 1998 8:00am

ANNUAL REPORT 1998 Secretary of State Division of Corporations			Secreta	Secretary of State	
	MENT # P9700 ONE, MARBLE & TILE, CO.	00022376 (2)			
GI SIC	JNE, MANDLE & TILE, CO	nr.		A THE REPORT OF THE PROPERTY O	
Principal Place of Business Mailing Address				/ I DEDVIDON HOD DENEY NOBEL DONIN TOURN D	MINT ORING HOUR HINDS HIND TO BE SAIL (BR)
14952 SW 89TH ST. 14952 SW 89TH ST.					
MIAMI FL 331	3 0	MIAMI FL 33196		<u> </u>	E IN THIS SPACE
				3. Pate incorporated or Qualified 03/12/1997	
2. Principal P	lace of Business	2a. Mailing Address		4 FEL Mumber	Applied For
21		26		65-073 5	
Suite, Apt.	#, BIC.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	6	City & State		8. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip 24	Country	Zip 3	Country	8. This corporation owes or has p Personal Property Tax due Jun	 /
	9. Name and Address of Curre			10. Name and Address of New F	
DURAN, MARIA T. BOZANO					
14952 SW 89TH ST. MIAMI FL 33196 82 Street Address (P. 14952)				Address (P.O. Box Number is Not Accepted 14952 SW 89TH ST	able)
MIA	MI LT 22 180		83		
			84 City	.4T % 14T	E1 85 Zip 903196
44 5		9		MIAMI	Γ !-
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 upont, or both, a 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 familiarly in, and accept the obligations of Section 607 0505, Florida Statutes.					
	im familiary by and accept the opil	gallers of Section 507:0505, Fioric	da Statutes.		4/14/98
				re required when reinstating)	DATE
12.	OFFICERS A	ND PIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFF	Change Addition
NAME	BOZANO, GUILLERMO		1.2 NAME		
STREET ADORESS	14952 SW 89TH ST.		1.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33198	T Drutte	1.4 CITY-ST-ZIP	D C M	Change Addition
TITLE NAME	DST ————————————————————————————————————	☐ DELETE	2.1 TITLE 2.2 NAME	DST MARIA T. BOZANO	Change Addition
STREET ADDRESS	14952 SW 89TH ST.		2.3 STREET ADDRESS	14952 SW 89TH ST	
CITY-ST-ZIP	MIAMI FL 33196		2.4 CITY+ST-ZIP	MIAMI, FL 33196	
TITLE		☐ DELETE	3.1 TITLE		Change Addition
NAME STREET ADDRESS			3.2 NAME 3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		DELETE	4.1 TITLE		Change Addition
NAME CTOCEY ADDRESS			4, 2 NAME		
STREET ADORESS CITY-ST-ZIP			4.3 STREET ADDRESS 4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS		<u> </u>	5 3 STREET ADDRESS	Į	
CITY+ST-ZIP TITLE		☐ DELETE	5.4 CITY - ST - ZIP 6.1 TITLE		Change Addition
NAME			6.2 NAME	1	•
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP	certify that the information supplied	with this filing does not qualify for t	64 CITY-ST-ZIP	red in Section 119 07(3)(i) Florida Statutes	I further certify that the information
14. Thereby 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 supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver or trustee en powered to execute this leport 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.					
SIGNAT	URE:	and he		4/14/98	(305) 403-3450