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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000039603 (0)

A & R TILE SERVICE CORP.

Principal Place of Business Mailing Address

FILED Jun 22 1998 8:00am Secretary of State



| MIAMI FL 33134 | | 4705 WEST FLAGLER ST MIAMI FL 33134 | 4705 WEST FLAGLER STREET MIAMI FL 33134 | | DO NOT WRITE IN THIS SPACE | |
|---|---|--|--|--|---|--|
| | | | | | 3. Date Incorporated or Qualified 05/01/1997 | |
| 2. Principal P | lace of Business | 2a. Mailing Address | | | 4. FEI Number | Applied For |
| 21 | | 26 | <u>├</u> | | 65-0751454 | Not Applicable |
| Suite, Apt. #, etc. | | Suite, Apt #, etc. | | | | \$8.75 Additional |
| 22 | | | 27 | | 5. Certificate of Status Desired | Fee Required |
| City & State | | City & State | City & State | | 6. Election Campaign Financing | \$5.Q0 May Be |
| 23 | | 28 | 28 | | Trust Fund Contribution | Added to Fees |
| Zip | Country | Ζφ | Countr | у | 8. This corporation owes or has paid the cur | rrent ear Intangible |
| 24 | 25 | 29 | 30 | | | Yes No |
| 9, Name and Address of Current Registered Agent | | | | 10. Name and Address of New Registered Agent | | |
| | rnandez, roger | | 81 | Name | | |
| | 15 WEST FLAGLER STREET | | 82 | Street Add | dress (P.O. Box Number is Not Acceptable) | |
| MIA | VMI FL 33134 | | - | | <u>_</u> | |
| i | | | 83 | ' | | |
| • | | | 84 | City | FL | 85 Zip Code |
| 11. Pursuant I | to t he provisions of Sections 607.05 egi ster ed agent or both, in the Stat m familiar with, and accept the obli | 02 and 607 1508, Florida Statut e of Florida. Such change was a | es, the above authorized b | re-named co y the corpora | rporation submits this slatement for the purpose o ation's board of directors. I hereby accept the app | f changing its registered pointment as registered |
| SIGNATURE | · | , | | | | |
| 12. | Signature typed or printed name of major terestian | ND DIRECTORS | | ent signature requ | uired when renstating) DATE | S DIDEOTODO IN 10 |
| TITLE | Resident) | DELETE | 13. | | ADDITIONS/CHANGES TO OFFICERS AND | Change Addition |
| NAME | 1 | | 12 NAME | | | onungo reduction |
| STREET ADDRESS | Ann dekom | = InGlen ST | _ | | | 5 |
| CITY-ST-ZIP | 1 1/10m 1 1= (33/34 | | 1.4 City - ST - 7IP | | | 15 |
| TITLE | DV PResed got | DINGETON DELLE | 21 THLE | | | Change Addition |
| NAME | 4705 West | FINGLEN ST | 2.2 NAME | | | |
| STREET ADDRESS | | _ ′ | 2.3 STREET ADDRESS | | | |
| CITY-ST-ZIP | MIBMI 124 33134 | | . 2.4 CITY-ST-ZIP | | | |
| TITLE | | | 3.1 TITLE | | | Change Addition |
| NAME | | | 3.2 NAME | | | |
| STREET ADDRESS | | | 3.3 STREET | ADDHESS | | |
| CITY-ST-ZIP | | | 3.4. CITY- | ST-7IP | | |
| TITLE | | | 4.1 TITLE | ĺ | | ☐ Change ☐ Addition |
| NAME | | | 4. 2 NAME | | | |
| STREET ADDRESS | | | 4.3 STREET | | | |
| CITY-ST-ZIP TITLE | | DECF1E | 4.4 CITY-9 | S1 - ZIP | | The state of the s |
| NAME | | L bruit | 5.1 THILE | | | Change Addition |
| STREET ADDRESS | | | 5.2 NAME | 4000000 | | |
| | | | 5 3 STREET | | | |
| CITY-ST-ZIP TITLE | | DELFTE | 5.4 CITY - 5 6.1 TITLE | it-ZIP | | - Change Addition |
| NAME | | | 6.2 NAME | | 200002 56993 -06/22/380107903 | - Change Addition |
| STREET ADDRESS | | | 6.2 NAME | ADDRESS | | 86 y v. |
| CITY-ST-ZIP | | | 64 CHY-S | · · · · · · · · · · · · · · · · · · · | ***150.00 | 76.90 |
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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 logal 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 13 if changed, or on an attachment with an address.