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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P97000044276**1. Corporation Name

PORCELANOSA FLORIDA CORPORATION

Principal Place of Busines		Mailing Address			Elli 8011: 8013 01011 01010 11011 10010 1011 1001
8700 NW 13TH TERR		8700 NW 13TH			
MIAMI FL 33172		MIAMI FL 33172			
US		US		3. Date Incorporated or Qualife	RITE IN THIS SPACE
				05/19/1997	' }
2. Principal Place of Busi	ness	2a. Mailing Address		4 FEI Number	Applied For
2. Frincipal Flace of Busi	—	26		65-0780648	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			S8.75 Additional
22	2	27		5. Certificate of Status Desired	Fee Required
City & State	,	City & State		6. Election Campaign Financing	
23	2	18		Trust Fund Contribution	Added to Fees
Zip	Country	Zip −¬	Country ²	8. This corporation owes the cu	
24			00	Personal Property Tax. 10. Name and Address of New	
9. Name	and Address of Current Re	gistered Agent	81 Name	10. Name and Address of New	Adjustered Agent
OUINTANA J. LUIS				ENRIQUE BEKEN	GUER
338 MINORCA AVE.			82 Street A	ddress (P.O. Box Number is Not Accept	774 AVE APT* 107
CORAL GABLES FL 33134			83	Join MM	11.1 11.10
			84 City	MIAMI	FL 85 Zip Code 33478
11. Pursuant to the provi	sions of Sections 607.0502 an	d 607.1508, Florida Statutes	, the above-named c	orporation submits this statement for the	e purpose of changing its registered
agent. I am familiar v	ith, and accept the obligations	of, Section 607.0505, Flori	da Statutes.	ration's board of directors. I hereby acc	0.00
SIGNATURE	& Konston	ENRIQUE BEF	renguer		1.9.99
Signature, type	d or printed name of registered agent and	title if applicable. NOTE: F	Registered Agent signature rec		DATE
12.	OFFICERS AND D	DELETE	13.	P ADDITIONS/CHANGES TO C	FFICERS AND DIRECTORS IN 12 Change Addition
•	JOSE SORIANO	- Durenc		SORIANO, JOSE	
0704.1	340 KM 562			CTRA. N - 340, KM. 56	}
CACTEL	ON VI 33134			VILLARREAL ESPANA	12540
TITLE VP		☐ DELETE		VP	. Change Addition
- ''	et, maria Jose sor		2.2 NAME	SDRIANO, MARIA JOSE	
	340 KM 562		2.3 STREET ADDRESS	CTRA. N-340, KM 56	
CITY-ST-ZIP VILLARE			2. 4 CITY-ST-ZIP	VILLARREAL, SPAIN, 1	2540
TITLE S		☐ DELETE		S	Change
NAME MOREN), HECORT COLONQU			colonques, hector	
	40 KM 562			CTRA. N-340, KM 56	rl.n
CITY-ST-ZIP VILLARE	_ CA			VILLARREAL, SPAIN, 12	540 Saddillar
mre T		☐ DELETE	4.1 TITLE	T	☐ Change ☐ Addition
, , ,	JUAN FRANCISCO		4. 2 NAME -	RAMDS, JUAN FRANCIS	្រប
	340 KM 562		4.3 STREET ADDRESS	CTRA. N-340, KM. 56	2540
CITY-ST-ZIP VILLARE	AL UA			VILLA BREAL, SPAIN, 1	☐ Change ☐ Addition
TITLE		☐ DETE IE	5.1 TITLE		C) Shange C Fadulatin
NAME			5 2 NAME		
[5.2 NAME 5.3 STREET ADDRESS		
STREET ADDRESS			5.3 STREET ADDRESS 5.4 C/TY-ST-Z/P		

14. I hereby 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 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, with all other like empowered.

6.2 NAME

6.3 STREET ADDRESS

SIGNATURE:

NAME

STREET ADDRESS CITY-ST-ZIP