SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000049969 (3)

EUROTECH TILE & MARBLE, INC.

FILED Oct 01 1998 8:00am Secretary of State

	_				
Principal Plac	e of Business	Malling Address			
2907 SW BOXWOOD CIRCLE 2907 SW BOXWOOD CIRC		.E			
PORT ST. LUCIE FL 34953 PORT ST. LUCIE FL 34				20 1107 1110177 11171	UA ANADE
				DO NOT WRITE IN TH	HIS SPACE
				3. Date incorporated or Qualified	
2 Principal D	Place of Rusiness	2a. Mailing Address		06/05/1997 4. FEI Number	Applied For
2. Principal Place of Business 2a. Mailing Address 2b. Mailing Address 2c. Same			65-0765872	Applied For Not Applicable	
		Suite, Apt. #, etc.		1000000	\$8.75 Additional
27		⊢ -¬		5. Certificate of Status Desired	Fee Required
City & State - City & State			- 	6. Election Campaign Financing	\$5.00 May Be
23 roct St. Lucie, MC 28 SAV				Trust Fund Contribution	Added to Fees
Zip Country Zip Sme 24 3443 25 St. Lucie 29 Sme			Country 30 SAME	This corporation owes or has paid the operational Property Tax due June 30.	current year Intangible
241	9. Name and Address of Current	[25]	30 37171	10. Name and Address of New Registers	
POSCADEIRO VECTU 81 Namé?					
				zenbury, Keith	
PORT ST. LUCIE FL 34953			82 Street Addr	ress (R.O. Box Number is Not Acceptable)	
FORT 31. LOUIZ FL 34933			83	Proces C t	
			84 CIPGE-	+ St. Lucie F	L 85 Zp Code 3
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					
I office or registered agent, or 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 with, and accept the obligations of, section 607.0505, Florida Statutes. SIGNATURE X Duty Duty Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
SIGNATURE	Signature typed or printed name of registered agent	and trile if applicable. (NO	TE: Registered Agent signature requ	ulred when reinstating) DATE	10
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
TITLE	D	DELETE	1.1 TITLE		Change Addition
NAME	Bo ze nbury, Keith		1.2 NAME		
STREET ADDRESS	2907 SW BOXWOOD CIRCLE		1.3 STREET ADDRESS		
CITY-ST-ZIP	PORT ST. LUCIE FL 34953		1.4 C/TY-ST-ZIP		
TITLE		DELETE	2.1 TITLE		Change Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		'
CITY-ST-ZIP			2.4 CITY-ST-ZIP		
TITLE		DELETE	3.1 TITLE		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		1
STREET ADDRESS			4.3 STREET ADDRESS		Ì
CITY-ST-ZIP			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			5.4 CITY-ST-ZIP		
TITLE		DELETE	6 1 TITLE	· · · · · · · · · · · · · · · · · · ·	Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		
44 Lhamburge	08 0 -441 5 8 45 6 1 10 1	1 1 20 1 1 10 1 10			

4. 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.

CICNATURE.

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9-72-98

F1-1-285-2290