2000 UNIFORM BUSINESS REPORT (UBR) FILED DOCUMENT # P97000070685 May 26, 2000 8:00 am Secretary of State 1. Entity Name B & H TILE AND MARBLE, INC. 05-26-2000 90044 001 ***300.00 Principal Place of Business Mailing Address 2679 W 76TH ST 2679 W 76TH ST HIALEAH FL 33016 HIALEAH FL 33016-5617 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 65-0830739 Not Applicable \$8.75 Additional Country Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent ---- 6. Name and Address of Current Registered Agent Name AVELLAN, LILIANA V ESQ. Street Address (P.O. Box Number is Not Acceptable) 306 ALCAZAR AVENUE SUITE 302 CORAL GABLES FL 33134 Zia Code tilis statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. 8. The above named entity submits 02-16-00 SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed applicable FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Addition ☐ Change ☐ Delete TITLE TITLE HENRIQUEZ, ALEJANDRO NAME NAME STREET ADDRESS STREET ADDRESS 2679 WEST 79TH STREET CITY-ST-ZIP CITY-ST-ZIP HIALEAH FL 33016 ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME BLANCO, DELFIN NAME STREET ADDRESS STREET ADDRESS 2679 W 76TH ST CITY-ST-2IP CITY-ST-ZIP HIALEAH FL 33016 ☐ Addition Change ☐ Delete ---- +-TITLE --BLANCO, ORLANDO NASAF NAME STREET ADORESS STREET ADDRESS 2679 W 76TH ST CITY-ST-ZIP CITY-ST-ZIP HIALEAH FL 33016 -E Addition - Change TITLE TITLE ' Delete NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Fiorida Statutes. I further certify that the information indicated on this report or supplemental 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, Fiorida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an adss, with all other like empowered. SIGNATURE: Dâytime Phone # FICER OR DIRECTOR SIGNATURE AND T