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

CORPORATION **ANNUAL REPORT**

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9700080266 (4)

B2 TILE DESIGNS. INC.

FILED Jan 29 1998 8:00am Secretary of State



Dringle of Dire	o of Business	Maxis	Address							
Principal Place of Business Mailing Address 8740 SW 57TH ST 8740 SW 57TH ST										
	8740 SW 57TH ST						6 NOT WEITE M. T. II	0.001.05		
						3. Date Incorporated	O NOT WRITE IN THIS or Qualified	S SPACE		
						09/15/1997	O Guaineu			
	lace of Business		ng Address	1 .		4. FEI Number	0 = 4 =	Ar	oplied For	
21 1804 N. UNIVERSITY OR 26 1804 NA VI					1817	7/65-078	7562		ot Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.						5. Certificate of Statu	s Desired	\$8.75 / Fee Re	-	
22 27 City & State 7 City State						Election Campaign Financing \$5.00 May Be				
23 PEMBROKE PINESITA28 19MBROKYLINYS						, ,	Trust Fund Contribution			
Zip	Country D24 25 BROW	1400 T	12001/	Country		8. This corporation o			_ ~	
24 330	9. Name and Address of		Agent	30 /5 6	and a	Personal Property O. Name and Addre			∐ No	
RΩ	SENBLAT, BENJAMIN	Out of the state o	- Agent	81	Name	IG, Marile and Magre	Je of Ribin Flogististe	a rigott		
0740 CM ETTLI CT						82 Street Address (P.O. Box Number is Not Acceptable)				
COOPER CITY FL 33328										
				83						
				84	City			85 Zip (Code	
44 Pureuent	to the provisions of Sections 6	07 0502 and 607 150	08 Florida Statute	s the above	a named co	rnoration submits this state	ment for the purpose		s registered	
office or r	egistered agent, or both, in the m familiar with, and accept the	e State of Florida, Su	ich change was at	uthorized by	the corpora	ation's board of directors. I	hereby accept the ap	opointment as	registered	
	m andia win, and accept th	a conganons or, sect	1017 CO2.0005, F107	rida Statute:	,.					
SIGNATURE	Signature, typed or printed name of region	Jared agent and title if applic	:ablo (NOTE	Registered Age	ont signature req	uired when reinstating)	DATE			
12.	OFFICE	RS AND DIRECTORS		13.		ADDITIONS/CHANG	SES TO OFFICERS AF			
TITLE			☐ DELETE	1.1 TITLE		N 831 D 80	<i></i>	☐ Change	Addition	
NAME				1.2 NAME	IDDOCO E	SENTAMIN.	ROSPNB	LAT		
STREET ADDRESS				1.3 STREET	14	770 SW 5	1452		_	
CITY-ST-ZIP TITLE	· · · · · · · · · · · · · · · · · · ·		DELETE	2.1 TITLE	1-21	00846 (17)	123	Change	Addition	
NAME				2.2 NAME	2	164 8475/1	SPNT			
STREET ADDRESS				2.3 STREET	ADDRESS 5	874 E 059	NACHT			
CITY-ST-ZIP				2 4 CHY-	ST - ZIP	170500 5	10-57	<u> </u>		
TALE			☐ DETELE	3.1 TITLE	C	OUTH CITY.	FL 3333	Change	☐ Addition	
NAME				3.2 NAME		·				
STREET ADDRESS				3.3 STREET						
CITY-ST-ZIP			DELETE	3.4 CITY-5	i1-ZIP			Change	Addition	
NAME				4. 2 NAME	1			LJ Vilonigo		
STREET ADDRESS				4.3 STREET	ADDRESS					
CITY-ST-ZIP				4.4 CITY-S	1					
TITLE			DELETE	5.1 TITLE				Change	Addition	
NAME				5.2 NAME					'	
STREET ADDRESS				5.3 STREET	ADDRESS					
CITY-ST-ZIP			DELETE	5.4 CITY - S	1-ZIP			Chappe	Addition	
TITLE			☐ DELETE	6.1 TITLE 6.2 NAME				∟ Change	Addition	
NAME Street address				6.3 STREET	AUDRESC					
CITY-ST-ZIP				6.4 CITY-S						
14. I hereby o	erlify that the information sup	plied with this filing d	oes not qualify for	the exemp	tion stated in	n Section 119.07(3)(i), Flori	da Statutes. I further	certify that the	information	
indicated officer or	on this annual report or suppt director of the corporation or t	ornental annual repor he receiver or truster	1) is true and accu empowered to e	rate and the xecute this	at my signat report as <u>/fe</u> i	ture shall have the same let quited by Chapter 607, Flo	jai effect as if made i rida Statutos; and tha	under oath; tha t my narge apy	attam en Bozasin	
Block 12 (director of the corporation or to or Block 13 if changed, or on	an attachment with a	n address.		\mathbb{Z}	DINTHUMYC	1//_	70	ا حر	
CIGNAT	LIDE A	nan III			· Z	DSGAIRI AT	- <i> 21/00</i>		2555	