**PROFIT** CORPORATION ANNUÂL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

**DIVISION OF CORPORATIONS** 

## DOCUMENT # P97000087715

D & M TILE INSTALLERS, CORP.

**FILED** Feb 21, 1999 8:00 am Secretary of State

02-21-1999 90009 041 \*\*\*150.00



District Disc		Admilian Automon			I INDITARY ILD I PRIN BRIN BRIN BRIN BRIN I BRIN FOUN FOUN FOUN FOUN FOUN FOUN FOUN FOU	(B)	
Principal Plac		Mailing Address					
23650 S.W. 124TH AVENUE   23650 S.W. 124TH AVENUE   MIAMI FL 33030   MIAMI FL 33030					,		
					DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified	Į	
<u>}~</u> → .	,	egy as			: 10/10/1997		
2. Principal Place of Business 2a. Mailing Address					. ,4. FEI Number Applied For		
21 /9470 CW 121 ADE 26					65-0809240 Not Applica	9k	
Suite, Apt.	#. etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired  \$8.75 Additiona		
22		27 `			5. Certificate of Status Desired Fee Required		
City & State City & State					6. Election Campaign Financing \$5.00 May Be		
23 /11/18	IMI PI- DAGE	28			Trust Fund Contribution Added to Fees		
Zip	Country	Zip	Countr	У	8. This corporation owes the current year Intangible	1	
24 331		29 30	<u> </u>		Personal Property Tax. Yes No		
	9. Name and Address of Current	Registered Agent		41 1	10. Name and Address of New Registered Agent	$\dashv$	
-	NOCO MICHE		8	1 Name			
,	NOSO, MIGUEL		8:	2 Street	Address (P.O. Box Number is Not Acceptable)	ヿ	
23650 S.W. 124TH AVENUE				1			
MIAI	MI FL 33030		8:	3			
}			84	City	85 Zip Code		
1				1	corporation submits this statement for the purpose of changing its registers		
SIGNATURE	Signature, sped or printed game of registered agent	and life if applicable. (NOTE Re			corpination's board of directors. I hereby accept the appointment as registered	ةٍ المنظ	
12.		OFFICERS AND DIRECTORS			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	<u>.</u>	
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NAME	BEINOSO, MIGUEL		1.2 NAME		`	}	
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i		☐ DELETE	6.1 TITLE 6.2 NAME		☐ Change ☐ Add	ition	

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 changes, or on an attactment with an address, with all other like empowered.

SIGNATURE: 🛴

RED ED OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR