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

P**RO**FIT CORP**O**RATION ANNUA**L** REPORT

1**9**98

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

P97000101993 (8)

FILED Jun 30 1998 8:00 am Secretary of State

	TILE, INC.	Mailing Address			
1120 N.W. 114TH STREET 1120 N.W. 114TH STREE MIAMI FL 33168 MIAMI FL 33168			ET	DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified 12/03/1997	
-2. Principal F	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21	• }	26	ľ	Appliced FOR.	Not Applicable
Suite, Apt. 22	#, etc .	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stal	le _	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	B. This corporation owes or has paid the	
24	25	nt Sepieteral Apont	30	Personal Property Tax due June 30.	Yes No
	Name and Address of Curre	ur vafizratan Võeur	81 Name	10. Name and Address of New Register	a Agent
	REYES, JUAN				
	120 N.W. 114TH STREET		82 Street Ad	dress (P.O. Box Number is Not Acceptable)	
Mi	IAMI FL 33168		83		
	r				
	:		. 84 City	£	85 Zip Code
11. Pursuant office or a agent. I a	am familiar with, and accept the oblic	02 and 607.1508, Florida Statu e of Florida. Such change was pations of, Section 607.0505, F	ites, the above-named co authorized by the corpori lorida Statutes.	rporation submits this statement for the purpos- ation's board of directors. I hereby accept the a	e of changing its registered appointment as registered
SIGNATORE	Sign time, typed or printed name of registered a	nt and title if approcable (NO	TE. Registered Agent signature req	uired when reinstating) DAT	£
12.	OFFICERS AN	ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	0	☐ DELETE	1.1 TITLE		Change Addition
NAME	REYES, JUAN		1.2 NAME		
STREET ADDRESS	(120 N.W. 114TH STREET		1.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33168	DELETE	1.4 CITY-ST-ZIP	<u></u>	Channe Addition
TITLE	D MILLAN FRANCISCO	L' DELEIE	2.1 TITLE		Change Addition
NAME	MILIAN, FRANCISCO		2.2 NAME		
STREET ADDRESS	\$501 N.W. PROAD MANOR		2.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	MAMI FL 33147	DELETE	2. 4 CITY - ST - ZIP 3.1 TITLE		Change Addition
NAME	DIAZ, AUGUSTIN		3.1 (II) LE 3.2 NAME		The country of very control
NAME STREET ADDRESS	350 EAST 34TH STREET #2	01	3.2 NAME 3.3 STREET ADDRESS		
	MALEAH FL 33013	01			
CITY-ST-ZIP TITLE	INCLAIT E 30010	DELETE	3.4. CITY - ST - ZIP 4.1 TITLE		Change Addition
NAME		F- 2-11-14	4.2 NAME		analys reconcto
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		DELFTE	51 TITLE		Change Addition
NAME		-	52 NAME	9000025798	-
STREET ADDRESS			5.3 STREET ADDRESS	9000025796 -07/06/9801007	046
CITY-ST-ZIP			5.4 CITY-ST-ZIP	***150.00	<i>></i> 10
TITLE		DELETE	6.1 TITLE	Λ	Change Addition
NAME			6.2 NAME	A.K.	
STREET ADDRESS			6.3 STREET ADDRESS	M 4/30	
CITY-ST-ZIP			6.4 CITY - ST - ZIP	•	

Indeptored by 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 eath; that I am an officer or director of the corporation or the receiver or trusted 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.

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