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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

P97000102643 (8)

DOCUMENT # JUPG TILES INC.

Principal Place of Business

Mailing Address

FILED Jun 16 1998 8:00am Secretary of State



6800 SW 14TH STREET MIAMI FL 33144			6800 SW 14TH STREET MIAMI FL 33144					
						DO NOT WRITE IN THIS SPACE		
						Date Incorporated or Qualified 12/03/1997		
2. Principal Pla	ace of Business	2a. Mailing A	ddress			4. FEI Number Applied F	or	
21		26	26			K 65 - 0800) 69 Not Appli	cable	
Suite, Apt. (#, etc.	l1	Suite, Apt. #, etc.			5. Certificate of Status Desired See Required Fee Required		
City & State	· · · · · · · · · · · · · · · · · · ·		de		- ,	Election Campaign Financing \$5.00 May B		
23	•	28				Trust Fund Contribution Added to Fees		
Zip	Country	Zip		Country		8. This corporation owes or has paid the current year Intangible		
24	25	29	30			Personal Property Tax due June 30. Yes No	ĺ	
	Name and Address of Co		nt	1001		10. Name and Address of New Registered Agent		
60	nzalez, juan j		<u> </u>	81	Name			
	0 SW 14TH STREET		82 Street Ad		Street Add	ddress (P.O. Box Number is Not Acceptable)		
MIA	MI FL 33144			83				
				""				
				84	City	FL 85 Zip Code		
					L		i	
office or re	o t he provisions of Sections 60a egi ste red agent, or both, in the f in fam iliar with, and accept the c	State of Florida, Such d	hande was a	authorized by	/ the corpor	rporation submits this statement for the purpose of changing its regis ation's board of directors. I hereby accept the appointment as registe	ered	
SIGNATURE	Signature, typed or printed more of register	and the state of t	(NOTE	F Registered Age	ord signature reg	uired which reinstating) DATE		
		S AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1	2	
12.	<u> </u>		DELETE	1.1 THEF			ddition	
1	GONZALEZ, JUAN J		_	1.2 NAME				
NAME	6800 SW 14TH STREET			1.3 STHEET	YDDDEGG			
STREET ADDRESS	MIAMI FL 33144							
CITY-ST-ZIP	MINNI 1.5 22.144 :		DELETE	1.4 CITY - S 2.1 TITLE	01 · ZIP	Change A	ddition	
TITLE	+ %	<u> </u>	ן טננות	- 1		C Straige C A	duiton	
NAME				2.2 NAME				
STREET ADDRESS				2.3 STREET				
CITY-ST-ZIP			1 person	2. 4 CITY-	ST-ZIP	Change	ddilian	
TITLE	2/	L_] DELFTE	3.1 TITLE		☐ Change ☐ A	ddition	
NAME	NA			3.2 NAME	•			
STREET ADDRESS				3.3 STREET				
CITY-ST-ZIP			T 60. 505	3.4. CHY-	SI - 71P	——————————————————————————————————————	1100	
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NAME				4. 2 NAME		Milalle	1	
STREET ADDRESS	.*			4.3 STREET	ADDRESS	41111/1 ₂		
CITY-ST-ZIP				4.4 CITY - S	31 · ZIP	10410		
TITLE	<u> </u>	T.	DELETE	51 TITLE		Change A	ddition	
NAME	•			5 2 NAME	1			
STREET ADDRESS				5.3 STREET	ADDRESS		· ' /	
CITY-ST-ZIP				5.4 CITY - 9	ST-ZIP	,		
TITLE	· · · · · · · · · · · · · · · · · · ·		DELFTE	6.1 TITLE	- 	:30100025526;446range □ A -06/17/3801044018 ***150.00	ddilion	
NAME				6.2 NAME		-06/17/9801044018	ļ	
l i					T ADDRESS	***150.10	j	
STREET ADDRESS				6.4 CITY-		e all restact to taction]	
CITY-ST-ZIP	certify that the information suppl	lied with this filing does	not qualify for	or the exemp	otion stated	in Section 119.07(3)(i), Florida Statutes. further certify that the inform	alion	

I nereby certify that the information supplied with this tiling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. Hurther certify that the informatic 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.