**PROFIT CORPORATION** ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # P98000030092

1. Corporation Name

INTERNATIONAL BATH AND MARBLE, INC.

Principal Place of Business

Mailing Address

## FILED May 05, 1999 8:00 am Secretary of State

05-05-1999 90117 038 \*\*\*150.00



7480 FAIRWAY DRIVE SUITE 106		7480 FAIRWAY DRIVE							
MIAMI LAKES FL 3301						DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualifed 04/01/1998			
2. Principal Place of Business 21 7480 Fairway Drive 22 Mailing Address 26 Same				<u> </u>		4. FEI Number (50824564	}	Applied For	
Suite, Apt. #, etc. Suite, Apt. #, etc.				<u> </u>		5. Certificate of Status Desired	\$8.75	Additional Required	
22 City & State	<u> </u>	27   City & State				a Florida Octobria			
23 Miami,	FL	28				6. Election Campaign Financing Trust Fund Contribution	Added	May Be d to Fees	
Zip 24 33014	Country  25  Country	Zip 29	Country 30			This corporation owes the current year I     Personal Property Tax.	☐ Yes	□No	
9. 1	Name and Address of Current	Registered Agent	10. Name and Address of New Registere	d Agent					
CODALCZ	VV DOCE			81	Name				
GORALCZYK, ROSE 122 S.W. 54TH AVENUE				82	Street	Address (P.O. Box Number is Not Acceptable)			
PLANTATION FL 33317			İ	83					
			-	84	City	F	85 Zip	o Code	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered									
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.									
SIGNATURE Signatur	e, typed or printed name of registered agent	and title if applicable. (NOT	E: Registered	Ageni	t signature r	required when reinstating)	38/99	7	
12.	OFFICERS AND	DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS	AND DIRECT	ORS IN 12	
TITLE PRES. TOO	se Goralczyk	DELETE	1.1 TIT	LE		Vice President	Change	e 🔲 Addition	
NAME IO	so will show Mil	0 # 602 W.	1.2 NAME			V166   1651661			
STREET ADDRESS	Hillsbord Black, FL 33062		1.3 STI	REET	ADDRESS				
CITY-ST-ZIP HI	llsbord black, Fi	L 33069	1.4 CIT	Y-ST	- ZIP				
TITLE		☐ DELETE	2.1 ∏∏	LE		President Lynda Schwartz 1212 Bayview Circle	Change	e Addition	
NAME			2.2 NA	ME		Lynda Schwartz			
STREET ADDRESS			2.3 ST	REET	ADDRESS	1212 Barview Circle			
CITY-ST-ZIP	ZIP		2. 4 CT	ry-s	T-ZIP	Weston, FL 33326			
TITLE			LETE 3.1 TIT				Change	e	
NAME			3.2 NA	ME					
STREET ADDRESS			3.3 STI	REET	ADDRESS				
CITY-ST-ZIP			3.4. CI	TY- \$1	T-ZIP				
TITLE		☐ DELETE	4.1 TIT				Change	e 🔲 Addition	
NAME			4. 2 NA	ME					
STREET ADORESS			4 3 ST	REET	ADDRESS				
CITY-ST-ZIP			4.4 CIT						
TITLE	•	[] DELETE	5.1 TIT				☐ Change	e Addition	
NAME			5.2 NA	ME				į	
STREET ADDRESS			5.3 STI	REET	ADDRESS			1	
CITY-ST-ZIP			5.4 CIT	Y-ST	-ZIP			1	
TITLE		☐ DELETE	6.1 TIT	LΕ			Change	e	
NAME			6.2 NA	ME					
			6.3 ST	REET	ADDRESS				
J.I.LET ADDITEDO									

CITY-ST-ZIP 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 of chapter 607, or on an attachment with an address, with all other like empowered.

SIGNATURE