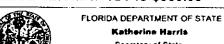
TILE NOW. TIL
PROFIT
CORPORATION
ANNUAL REPORT
1999
OCUMENT #
ELDON ENTERPRISE



ANNUAL REPORT Secretary of State 1999 DIVISION OF CORPORATIONS					
	MENT # P98000 ENTERPRISES, INC.	034966			And Andrews
Principal Place of Business Mailing Address 1221 BRICKELL AVENUE 1221 BRICKELL AVENUE SUITE 900 SUITE 900 MIAMI FL 33131 MIAMI FL 33131					DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified 04/17/1998
			+-1€		4. FEI Number Applied For Not Applicable
Suite, Apt. #, etc. 22					5. Certificate of Status Desired Fee Required
23 Mi4MI F 28 Zip Country Zip			Country	,	Election Campaign Financing
24 3313		29 3	ا ا		Personal Property Tax. Yes No. 10. Name and Address of New Registered Agent
MILITANA, JOHN 8801 BISCAYNE BLVD. SUITE 101 MIAMI FL 33138 11. Pursuant to the provisions of Sections 607,0502 and 607,1508. Florida Statutes office or registered agent, or tooth, in the State of Florida. Such change was authagent. I am familiar with and provisions on Section 607,0505, Florida SIGNATURE				City e-named co	1/25/98
12.	Dig feture "special printed rema of registered agent OFFICERS AND		13.	N sgrature rece	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE NAME STREET ADDRESS	SOUTO, WALTER 1221 SPICKELL AVENUE SUITE 900 135		11 TITLE 12 NAME 13 STREE	ADORESS	Change Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS	☐ DELETE 21		14 CITY-S 21 TITLE 22 NAME 23 STREE	T-ZIP	☐ Change ☐ Addition
CITY-ST-2IP TITLE NAME STREET ADDRESS		☐ DELETE	2.4 CITY-5 3.1 TITLE 3.2 NAME 3.3 STREET		Change Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS	. >	C) DELETE	3.4. CITY-S 4.1 THRE 4.2 NAME 4.3 STREET	ADDRESS	☐ Change ☐ Addition :
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ DELETE	44 OTY-S 5.1 TITLE 5.2 NAME 5.3 STREET 5.4 CITY-ST	ADDRESS	Change Addition
TITLE HAME STREET ADDRESS		[] DELETE	BITTILE BINAME 63 STREET	ADDRESS	Changle Addition
14. I hereby or indicated of	ertify that the information supplied with	this filing does not qualify for the	6.4 GTY-ST e exempli	on stated in	n Section 119.07(3)(i), Florida Statutes. I further certify that the Information we shall have the same lenal effect as if made under outby that I am an

SIGNATURE: