

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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS

FILED Aug 17, 1999 8:00 am Secretary of State

08-17-1999 90011 018 \*\*\*150.00

DOCUMENT # P98000055954

Corporation Name MARK'S CUSTOM TILE, INC.

Principal Place of Business 8401 SOUTHSIDE BLVD. APT 704 JACKSONVILLE FL 32256 Mailing Address PO BOX 16952 JACKSONVILLE FL 32245-6952

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 06/22/1998 4. FEI Number 59-3518907 Applied For Not Applicable 5. Certificate of Status Desired \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees 8. This corporation owes the current year Intangible Personal Property Tax. Yes No

9. Name and Address of Current Registered Agent HENDERSON, MARK K 8401 SOUTHSIDE BLVD, APT 704 JACKSONVILLE FL 32256 10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code

I, 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

Table with 2 main columns: OFFICERS AND DIRECTORS (1.1-1.4, 2.1-2.4, 3.1-3.4, 4.1-4.4, 5.1-5.4, 6.1-6.4) and ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (Change, Addition). Includes entry for PSTD HENDERSON, MARK K.

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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Mark Henderson Date: Pres 5-1-99 9047334547

CR2E034 (11/98)

P98000055954  
~~605762-90014-18~~  
606735-90011-18

*Mark K Henderson*  
*Mark's Custom Tile, Inc.*  
*PO Box 16952*  
*Jacksonville, FL 32245-6952*  
*904-733-4547*

June 24, 1999

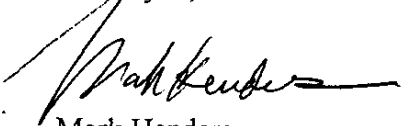
Florida Division of Corporations

RE: P980000055954

Dear DOC:

My corporate annual report was filed and paid timely but my check never cleared my bank. Please issue a new 30 day letter allowing me additional time to be considered filed timely as I replace the lost check.

Thank you,



Mark Henderson  
President