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

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Feb 03 1998 8:00am

Secretary of State

- I ABBANTIN AND HIDAN KANAL METAL HERA HADA BANTA DI DIE OKOKA DIBAK DEDAK DIRAK DIRAK DEDAK DIRAK

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(5)

B & J CERAMIC TILE & MARBLE CONTRACTORS, INC.

Principal Place of Dusiness Same Soffware Super Incorporated or Dusiness Same Soffware Super Incorporated Sup								
### STUART FL SH897 STUART FL SH897 STUART FL SH897 STUART FL SH897 A Detertopopated or Custified 12/31/1980	Principal Plac	ce of Business	Mailing Address			- TO DETENDENT THE CORE FLORE BONDS STATE STORE OF SETTINGUIS STATE STAT		
### STUART FL 34897 STUART FL 34897 STUART FL 34897 STUART FL 34897 DO NOT WHITE IN THIS SPACE					т			
2. Principal Pace of Business 2. A. Making Actrooss 3. 4. PET Number 59-3082871 Angular For 2012 12/31/1990 Series 59-3082871 Angular For 59				MOON OMEEN				
28 Minopal Place of Business 28 Making Address 4. Fit Number 59-3082871 160 Applied for 160 Applied fo								
2. Maining Address 2. Maining Address 3. Maining Address 5. South Apt 4, etc 5. Cardiscate of Status Desired 58.75 Address 58.75 Address 5. Cardiscate of Status Desired 58.75 Address 58.75 Address 5. Cardiscate of Status Desired 58.75 Address 5								
Solite, April #, etc. 26	O Dringland F	Name of Divisions						
Suite, Apt #, etc 2 2 2 2 2 2 2 2 2	<u> </u>					j jrippiled i bi		
Cly & State 27								
City & State Country Zip Country Zip Country Zip Country Zip Country Zip Country Zip Solo So		#, G (0	├ ──¬					
20 20 20 20 20 20 20 20		la .						
20 20 20 20 20 20 20 20			 γ ΄					
B. Name and Address of Current Registered Agent CLARK, ROBERT B. 1947 SOUTHEAST HARRISON STREET STUART FL 34997 195		Country	—	Countr				
S. Name and Address of New Registered Agent CLARK, ROBERT B. 1947 SOUTHEAST HARRISON STREET STUART FL 34997 88 Street Address (P.O. Box Number is Not Acceptable) 89 Street Address (P.O. Box Number is Not Acceptable) 80 Street Address (P.O. Box Number is Not Acceptable) 11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Fiorida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of Sections 90 forcers 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 107 050, Fiorida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 107 055, Fiorida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. This ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 14. OTHER STATES AND DIRECTORS IN 12 15. THIS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 16. This ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 16. This ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 16. This ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 16. This ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 16. This ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 13 19. ADDITIONS/CHANGES TO OFFICERS AND D		├ ─¬	├ - -┐ '	\vdash	,			
CLARK, ROBERT B. 1947 SOUTHEAST HARRISON STREET STUART FL 34997 11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statulos, the about a difference of optionated agent, or both, in the State of Florida Such change was authorized by the corporation submits this statement for the purpose of changing its registered efficiency or optionate and engineering of the purpose of Changing its registered signer. I am familier with, and accord the obligations of, Section 607,6505, Florida Statulos, the about and of directors. I horeby accept the appointment as registered efficiency or printed new of registered registered statulos. The about a statulos of the purpose of Changing its registered statulos. The about a statulos of the purpose of Changing its registered statulos. The about a statulos of the purpose of Changing its registered statulos. The about a statulos of the purpose of Changing its registered statulos. The about a statulos of the purpose of Changing its registered statulos. The about a statulos of the purpose of Changing its registered statulos. The about a statulos of the purpose of Changing its registered statulos. The about a statulos of the purpose of Changing its registered statulos. The about a statulos of the purpose of Changing its registered statulos. The about a statulos of the purpose of Changing its registered statulos. The about a statulos of the purpose of Changing its registered statulos. The about a statulos of the purpose of Changing its registered statulos. The about a statulos of the purpose of Changing its registered statulos. The about a statulos of the purpose of Changing its registered statulos. The about a statulos of the purpose of Changing its registered statulos. The about a statulos of the purpose of Changing its registered statulos. The about a statulos of the purpose of Changing its registered statulos of the purpose of Changing its registered statulos. The about a statulos of the purpose of Changing its registered statulos. The about a statulos of Changi	==1			1301				
1947 SOUTHEAST HARRISON STREET STUART FL 34997 194 City 195 Zip Code 11. Pursuant to the provisions of Sections 607 C600 and 607 1508; Findia Statutes, the above-named corporation submits this statement for the purpose of changing lis registered agent, or both, in the State of Fiorida Statutes, the above-named corporation submits this statement for the purpose of changing lis registered agent, or both, in the State of Fiorida Statutes, the above-named corporation submits this statement for the purpose of changing lis registered agent, or both, in the State of Fiorida Statutes. 195 Signature Signature state of Fiorida Statutes, the above-named corporation submits this statement for the purpose of changing lis registered agent, or both, in the State of Fiorida Statutes. 196 Calman Signature Signature state of Fiorida Statutes, the above-named corporation submits this statement for the purpose of changing lis registered agent, or both in the State of Fiorida Statutes. 197 Corporation submits this statement for the purpose of changing lis registered agent, or both in the State of Fiorida Statutes. 198 City State Statement Sta	CL			81	Name			
STUART FL 34997 STUART FL 34997 State Address (P.O. Box Number is Not Acceptable) State Address Address			REET	_	ļ <u>.</u>			
11. Pursuant to the provisions of Sections 607 0502 and 607, 1508. Finitida Statutes, the above named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Fiorida. Such change was submitered by the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of, Section 607 0505. Florida Statutos. SIGNATURE SIGNATURE SIGNATURE DELETE 1.1 TITLE PD			11661	82	Stree	et Address (P.O. Box Number is Not Acceptable)		
11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Floridal Statutos, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Floridal Statutos, the above-named corporation's board of directors. I heraby accept the appointment as registered agent, and accept the obligations of, Section 607.0505. Place of printed annex of registered agent, and accept the obligations of, Section 607.0505. Place of printed annex of registered agent and bin F applications. 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Place of the printed agent and bin F applications. 14. The PO CLARK, ROBERT B. 15. Third I 2 NAME 16. Third I 2 NAME 16. Third I 2 NAME 17. NAME 18. THIRD I 1. THIRD I 2. NAME 18. THIRD I 2. NAME 28. STREET ADDRESS 29. STREET ADDRESS 20. STREET AD	01,	0.211 (2 0.00)		83	 			
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 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 ecosyl the obligations of, Section 607,0505, Florida Statutos. SIGNATURE Signature Suprama hydro primited more of registered agent made for the purpose of changing its registered agent. I am familiar with, and ecosyl the obligations of, Section 607,0505, Florida Statutos. SIGNATURE Signature hydro primited more of registered agent made for familiar than 12 and				"				
11. Pursuant to the provisions of Sections 607.0502 Find 607.1509. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutos. SIGNATURE Signature, typical to printed name of registeria agent and time if agentation. 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 11. TIME CLARK, ROBERT B. 11. TIME CLARK, ROBERT B. 11. TIME CLARK, ROBERT B. 11. TIME 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 13. TARRET ADDRESS CITY-ST-2P TIME 14. GITY-ST-2P 14. GITY-ST-2P 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 14. GITY-ST-2P 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 16. TARRET ADDRESS CITY-ST-2P 17. TIME 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 10. TARRET ADDRESS CITY-ST-2P 11. TIME 19. CLARK, ROBERT B. 12. NAME 13. TARRET ADDRESS CITY-ST-2P 14. GITY-ST-2P 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 14. GITY-ST-2P 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 16. TARRET ADDRESS CITY-ST-2P 17. TIME 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 29. ADDITIONS/CHANG				84	City	₽ B5 Zip Code		
SIGNATURE PU	11 Pursuant	to the provisions of Sections 607.0	502 and 607 1609. Elorida Statut	on the show	0.0000	PL		
SIGNATURE SIGNATURE	OHIGH OF I	adiatatan adaur' or botti' iu tus 219	te of Fiorida. Such change was a	iutnorizea b	v the co	ed corporation submits this statement for the purpose of changing its registered orporation's board of directors. I hereby accept the appointment as registered		
Signature, speed or printed mare of regioned agent and print of apocitations CRITE Projectoric Agent signature required when renaturing DATE	agent. I a	im familiar with, and accept the obl	igations of, Section 607.0505, Flo	orida Statute	S.	, , ,,		
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE CLARK, ROBERT B. 12. NAME STREET ADDRESS CITY-ST-2P THE DELETE 2.1 TITLE DELETE 2.1 TITLE DELETE 2.1 TITLE DELETE 2.1 TITLE DELETE 2.3 STREET ADDRESS CITY-ST-2P DELETE 3.4 CITY-ST-2P TITLE DELETE 3.4 CITY-ST-2P TITLE DELETE 4.1 TITLE DELETE 3.4 CITY-ST-2P TITLE DELETE 4.1 TITLE DELETE 3.4 CITY-ST-2P TITLE DELETE 4.1 TITLE DELETE 5.1 TITLE DEL	SIGNATURE	Closetus transfer spirited and a second						
TITLE NAME CLARK, ROBERT B. 1947 S.E. HARRISON ST. STREAT ADDRESS CITY-ST-ZIP TITLE DELETE 21 TITLE 22 NAME 23 STREAT ADDRESS CITY-ST-ZIP TITLE 32 CAMP 33 STREAT ADDRESS CITY-ST-ZIP TITLE DELETE 41 TITLE 32 NAME 33 STREAT ADDRESS CITY-ST-ZIP TITLE 42 CITY-ST-ZIP TITLE 53 SAL CITY-ST-ZIP TITLE 54 CITY-ST-ZIP TITLE 55 STREAT ADDRESS CITY-ST-ZIP TITLE 56 STREAT ADDRESS CITY-ST-ZIP TITLE 57 STREAT ADDRESS CITY-ST-ZIP TITLE 58 STREAT ADDRESS CITY-ST-ZIP TITLE TIT	12				ent signatu			
NAME SIREET ADDRESS CITY-ST-ZIP STUART FL DELETE 13 STREET ADDRESS CITY-ST-ZIP 14 CITY-ST-ZIP DELETE 21 TITLE NAME 22 NAME 23 STREET ADDRESS CITY-ST-ZIP 15 CITY-ST-ZIP 16 CHANGE 31 STREET ADDRESS CITY-ST-ZIP 17 CHANGE 32 STREET ADDRESS CITY-ST-ZIP 18 CITY-ST-ZIP 19 CHANGE 33 STREET ADDRESS CITY-ST-ZIP 19 CHANGE 34 CITY-ST-ZIP 10 DELETE 41 TITLE NAME 34 CITY-ST-ZIP 17 CHANGE 35 STREET ADDRESS CITY-ST-ZIP 18 CHANGE 42 NAME 43 STREET ADDRESS CITY-ST-ZIP 18 CHANGE 55 YANAME 55 YANAME 55 YANAME 56 YANAME 57 YANAME 57 YANAME 58 STREET ADDRESS CITY-ST-ZIP 19 CHANGE 68 STREET ADDRESS CITY-ST-ZIP 19 CHANGE 19 CHANGE 19 CHANGE 10 CHANGE								
STREET ADDRESS CITY-ST-ZIP TITLE DELETE 21 TITLE DELETE 31 TITLE DELETE DELETE 31 TITLE DELETE DELETE 31 TITLE DELETE DELETE DELETE 31 TITLE DELETE DELETE DELETE DELETE 31 TITLE DELETE DE		CLARK, ROBERT B.				C Ottanga C Adolite		
STUART FL A CITY-ST-ZIP STUART FL					* * DDDFCC			
TITLE DELETE 21 TITLE Change Addition NAME 22 NAME 23 STREET ADDRESS CITY-ST-ZIP TITLE DELETE 31 TITLE Change Addition NAME 32 NAME 32 NAME 32 NAME STREET ADDRESS CITY-ST-ZIP 34, CITY-ST-ZIP TITLE DELETE 41 TITLE Change Addition NAME 31 STREET ADDRESS CITY-ST-ZIP ANDRESS CITY-ST-ZIP						5		
NAME STREET ADDRESS CITY-ST-ZIP DELETE JELETE JEL			DELETE	_	51 - ZIP	Change Addition		
STREET ADDRESS CITY-ST-ZIP 12.3 STREET ADDRESS CITY-ST-ZIP TITLE 1.3 STREET ADDRESS CITY-ST-ZIP TITLE 1.3 STREET ADDRESS 3.3 STREET ADDRESS 3.3 STREET ADDRESS 3.3 STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP TITLE 1.3 STREET ADDRESS CITY-ST-ZIP TITLE 1.4 STREET ADDRESS CITY-ST-ZIP TITLE 1.5 STREET ADDRES			La occit			Change L Adding		
CITY-ST-ZIP TITLE DELETE 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS CITY-ST-ZIP TITLE DELETE 4.1 TITLE AMME 4.2 NAME 4.3 STREET ADDRESS CITY-ST-ZIP TITLE DELETE 4.3 STREET ADDRESS CITY-ST-ZIP TITLE DELETE 4.3 STREET ADDRESS CITY-ST-ZIP TITLE DELETE 5.1 TITLE DELETE 5.1 TITLE DELETE 5.1 TITLE DELETE 5.3 STREET ADDRESS CITY-ST-ZIP TITLE DELETE 5.3 STREET ADDRESS CITY-ST-ZIP TITLE DELETE 5.3 STREET ADDRESS CITY-ST-ZIP TITLE DELETE 6.1 TITLE DELETE 6.1 TITLE DELETE 6.1 TITLE DELETE 6.3 STREET ADDRESS CITY-ST-ZIP TITLE DELETE 6.1 TITLE DELETE 6.3 STREET ADDRESS CITY-ST-ZIP TITLE DELETE 6.1 TITLE DELETE 6.3 STREET ADDRESS CITY-ST-ZIP TITLE DELETE 6.1 TITLE DELETE 6.3 STREET ADDRESS CITY-ST-ZIP TITLE DELETE 6.1 TITLE DELETE 6.3 STREET ADDRESS CITY-ST-ZIP TITLE DELETE 6.1 TITLE DELETE 6.1 TITLE DELETE 6.2 NAME 6.3 STREET ADDRESS CITY-ST-ZIP TITLE DELETE 6.1 TITLE DELETE 6.1 TITLE DELETE 6.1 TITLE DELETE 6.2 NAME 5.3 STREET ADDRESS CITY-ST-ZIP TITLE DELETE 6.1 TITLE DELETE 6.1 TITLE DELETE 6.1 TITLE DELETE 6.2 NAME 5.3 STREET ADDRESS CITY-ST-ZIP TITLE DELETE 6.4 CITY-ST-ZIP TITLE DELETE 6.5 TITLE DELETE 6.6 TITLE DELETE 6.7 NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE 6.1 TITLE DELETE 6.2 NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE 6.3 STREET ADDRESS CITY-ST-ZIP TITLE DELETE 6.1 TITLE DELETE 6.1 TITLE DELETE 6.1 TITLE DELETE Change Addition Ad					TDDDEGO			
TITLE DELETE 3.1 TITLE Addition Addi		•						
NAME STREET ADDRESS CITY-ST-ZIP DELETE 41 TITLE DELETE 41 TITLE Addition NAME 4.2 NAME 4.3 STREET ADDRESS CITY-ST-ZIP TITLE DELETE 41 TITLE ASTREET ADDRESS CITY-ST-ZIP TITLE DELETE 51 TITLE DELETE 51 TITLE Change Addition Addition NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE 51 TITLE ACITY-ST-ZIP TITLE DELETE 61 TITLE DELETE 61 TITLE Change Addition Addition NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE 61 TITLE Change Addition Addition Addition NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE 61 TITLE Change Addition Addition NAME STREET ADDRESS 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 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 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 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 Changter 607. Florida Statutes 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 the same legal effect as if made under oath; that I am an oath officer or director of the corporation or the receiver or trustee empowered to execute the same legal effect as if made under oath; that my si			DELETE		SI - ZIP	Change Addition		
STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP TITLE DELETE 41 TITLE Addition AME STREET ADDRESS CITY-ST-ZIP 4.2 NAME 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE DELETE 5.1 TITLE Change Addition Addition STREET ADDRESS CITY-ST-ZIP TITLE DELETE 5.1 TITLE STREET ADDRESS CITY-ST-ZIP TITLE DELETE 6.1 TITLE Addition Addition STREET ADDRESS CITY-ST-ZIP TITLE Addition Addition STREET ADDRESS CITY-ST-ZIP TITLE Addition	1		_ ottere			Change C Audito		
CITY-ST-ZIP TITLE DELETE 4 1 TITLE A2 NAME 4.2 NAME 4.3 STREET ADDRESS CITY-ST-ZIP TITLE DELETE 4.4 CITY-ST-ZIP TITLE DELETE 5.1 TITLE DELETE 5.1 STREET ADDRESS CITY-ST-ZIP TITLE DELETE 5.1 STREET ADDRESS CITY-ST-ZIP TITLE DELETE 6.1 TITLE DELETE 6.1 STREET ADDRESS CITY-ST-ZIP TITLE DELETE 6.1 STREET ADDRESS CITY-ST-ZIP TITLE DELETE 6.1 STREET ADDRESS 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 coath; that I am an officer or director of the corporation or trustee employered to execute this report as required by Chapter 607-Florida Statutes. In during appears in officer or director of the corporation or trustee employered to execute this report as required by Chapter 607-Florida Statutes. In during appears in officer or director of the corporation or trustee employered to execute this report as required by Chapter 607-Florida Statutes and that my signature shall have the same legal effect as if made under coath; that I am an officer or director of the corporation or trustee employered to execute this report as required by Chapter 607-Florida Statutes and that my appears in officer or director of the corporation or trustee employered to execute this report as required by Chapter 607-Florida Statutes and that my appears in officer or director of the corporation or trustee employered to execute this report as required by Chapter 607-Florida Statutes and that my appears in officer or director of the corporation or trustee employered to execute this report as required by Chapter 607-Florida Statutes.	ļ				*000000			
TITLE NAME A 2 NAME 4 1 TITLE A 3 STREET ADDRESS CITY-ST-ZIP TITLE DELETE 5 1 TITLE STREET ADDRESS CITY-ST-ZIP DELETE 5 1 STREET ADDRESS CITY-ST-ZIP TITLE DELETE 5 3 STREET ADDRESS CITY-ST-ZIP TITLE DELETE 6 1 TITLE AMME STREET ADDRESS CITY-ST-ZIP TITLE AMME 6 2 NAME 6 3 STREET ADDRESS CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 1 19.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report as recuired by Chapter 607. Florida Statutes 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 his report as required by Chapter 607. Florida Statutes and that my appear annears in								
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP DELETE 5.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE 6.1 TITLE DELETE 6.2 NAME STREET ADDRESS CITY-ST-ZIP 1.4. 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 Change 607. Florida Statutes, and that my name appears in officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Change 607. Florida Statutes, and that my name appears in			DELETE		51-21P	Change T Addition		
STREET ADDRESS CITY-ST-ZIP DELETÉ 5.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETÉ 5.1 TITLE STREET ADDRESS CITY-ST-ZIP TITLE DELETE 6.1 TITLE DELETE 6.1 TITLE Change Addition Addition DELETE 6.1 TITLE Change Addition Change Addition			Detect	1		El Change El Adollio		
CITY-ST-ZIP DELETE 5.1 TITLE DELETE 5.2 NAME 5.2 NAME 5.3 STREET ADDRESS CITY-ST-ZIP TITLE DELETE 5.4 CITY-ST-ZIP DELETE 6.1 TITLE Change Addition Change Change Addition Change Change Addition Change Cha					*DDD:cc	,		
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE 5.1 TITLE 5.2 NAME 5.2 NAME 5.3 STREET ADDRESS CITY-ST-ZIP TITLE DELETE 6.1 TITLE Change Addition Change Addition Change Addition Change Addition Change Addition Addition Change Addition				1				
STREET ADDRESS CITY-ST-ZIP DELETE 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP TITLE DELETE 6.1 TITLE Change Addition CALCITY-ST-ZIP 1.4 Increby 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 employered to execute his report as required by Chapter 607. Florida Statutes and that my same appears in			DELETE		1-714	Change T 14000		
STREET ADDRESS CITY-ST-ZIP DELETE 5.4 CITY-ST-ZIP 5.4 CITY-ST-ZIP 6.1 LITLE Change Addition CHANGE STREET ADDRESS CITY-ST-ZIP 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP 6.4 CITY-ST-ZIP 1.4. 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 cart; that I am an officer or director of the corporation or the receiver or trustee employered to execute this report as required by Chapter 607. Florida Statutes, and that my page appears in			- ottere			L Change Addition		
CITY-ST-ZIP 5.4 CITY-ST-ZIP 5.4 CITY-ST-ZIP 6.1 NITLE 6.2 NAME 6.2 NAME 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP 6.4 CITY-ST-ZIP 6.5 STREET ADDRESS 6.4 CITY-ST-ZIP 6.5 STREET ADDRESS 6.5 STREET ADDRESS 6.6 CITY-ST-ZIP 6.7 CITY-ST-ZIP 6.7 CITY-ST-ZIP 6.8 CITY-ST-ZIP 6.9 C					*0000000			
TITLE DELETE 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP 6.4 CITY-ST-ZIP 1.4. 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 cart; that I am an officer or director of the corporation or the receiver or trustee employered to execute this report as required by Chapter 607. Florida Statutes, and that my name appears in								
NAME 6.2 NAME 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 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			DELETE		r-ZIP	Dhanes Takara		
63 STREET ADDRESS 63 STREET ADDRESS 64 CITY-ST-ZIP 64 CITY-ST-ZIP 65 CITY-ST-ZIP 65 CITY-ST-ZIP 65 CITY-ST-ZIP 66 CITY-ST-ZIP 66 CITY-ST-ZIP 67 CITY-ST-ZIP 68 CITY-ST-ZIP 69 CITY-ST-ZIP 69 CITY-ST-ZIP 69 CITY-ST-ZIP 69 CITY-ST-ZIP 60 CITY-ST-ZIP 61 CITY-ST-ZIP 61 CITY-ST-ZIP 61 CITY-ST-ZIP 62 CITY-ST-ZIP 63 STREET ADDRESS 64 CITY-ST-ZIP 64 CITY-ST-ZIP 65 CITY-ST-ZIP 66 CITY-ST-ZIP 67 CITY-ST-ZIP 67 CITY-ST-ZIP 68 CITY-ST-ZIP 68 CITY-ST-ZIP 69 CITY-ST-ZIP 69 CITY-ST-ZIP 69 CITY-ST-ZIP 69 CITY-ST-ZIP 60 CITY-ST-ZIP 61 CITY-ST-ZIP 62 CITY-ST-ZIP 63 CITY-ST-ZIP 64 CITY-ST-ZIP 64 CITY-ST-ZIP 65 CITY-ST-ZIP 66 CITY-ST-ZIP 67 CI			Last Dettile			Li Change Li Addillo		
6.4 CITY-ST-ZIP 14. I hereby certify that the information supplied with this fitting 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	1				100e=05			
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	ľ	÷		ı		5		
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 page appears in		ertify that the information constind	with this filing does not qualify to	6.4 CITY-S	T-ZIP	tod in Postine 110 07/0V/) Florida Otto		
of the corporation of the receiver of trustee empowered to execute this report as required by Chapter 607. Florida Statutes, and that my name appears in	RIGICALEG (on unis annuai report or suppliemen	lal annual report is true and accu	irate and tha	al may eig	ignature shall have the same local affect or if made under eath: that I am an		
	Officer or c	airector of the corporation of the rec	eiver of trustee empowered to e	xecute this i	eport as	as required by Chapter 607, Florida Statutes; and that my name appears in		