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

PROFIT \*\*\*
CORPORATION
ANNUAL REPORT

1**9**98



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

S37413

(9)

**TOUCHSTONE TILE & MARBLE, INC.** 

FILED
May 18 1998 8:00am
Secretary of State



Principal Plac	ce of Business	Mailing Address				i individit ind inivi addir dindi biddi didir didir dibir dibir dibir dibir dibir dibir dibir dibir itdi
1680 CATHEDRAL DRIVE MARGATE FL 33063		1680 CATHEDRAL DI Margate Fl 33063	1680 CATHEDRAL DRIVE MARGATE FL 33063			
ļ						DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualified
O Principal C	Place of Business	The Addition Addition				03/08/1991
	-iace of Business	2a. Mailing Address				4. FEI Number Applied For
Suite, Apt.	# alc	Suite, Apt. #, etc.				65-0243569 Not Applicable
22	· · · · · · · · · · · · · · · · · · ·	27]				5. Certificate of Status Desired
City & Stat	to	City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	Zip	Cou	intry		8. This corporation owes or has paid the current year Intangible
24	25	29	30	ĺ		Personal Property Tax due June 30.  Yes No
	g, Name and Address of Curre					10. Name and Address of New Registered Agent
9	SPEARS, JACK			81	Name	
1680 CATHEDRAL DR						
		82 Street Add			at Address (P.O. Box Number is Not Acceptable)	
	MARGATE FL 33063			83		
				84	City	FL 85 Zip Code
44 Pursuant	to the provisions of Sections 607.05	02 and 607 1508 Elorida Ctat	utos the el	201/0	namaa	d corporation submits this statement for the purpose of changing its registered
Office or r	<b>registero</b> d agent, or both, in the Stat	e of Florida. Such cha <b>nge wa</b> s	s authorize:	d by	the cor	orporation'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 Statules.						
SIGNATURE Signature, typed or printed name of regulated agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE						
12.		VD DIRECTORS (NO	13.	Ager	il signaturi	
TITLE	PD	DELETE	1.1 10	TI F		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change Addition
NAME	SPEARS, JACK		1.2 NA			Change C Addition
STREET ADDRESS	1680 CATHEDRAL DR				I DDDEGG	
	MARGATE FL				ADDRESS	
CITY-ST-ZIP TITLE	MANGAIEFL	DELETE	1,4 CI 2,1 TO		- ZIP	Change GAddition
NAME						
STREET ADDRESS			2.2 NAME 2.3 STREE		NDDDFCC	DONALD GATO
CITY-ST-ZIP						1094 5W Ind Your Pompano Poch, FC 33000
TITLE		DELETE	2 4 Cl 3.1 Til		- Z(P	Change Paddition
NAME		בן סנונינ	3.2 NA			Codes Codes Codes
STREET ADDRESS					LD DD FOO	Para Chiras Ave
				3.3 STREET ADDRESS 4.3.4. CITY-ST-ZIP 4.3.4.		3946 DW 65 HUE 37313
CITY-ST-ZIP TITLE	<del></del>				- ZIP	Change Addition
NAME		C) PECCIE	4,1 TiT 4, 2 N/			☐ Change ☐ Addition
STREET ADDRESS					החחרמי	
					ADDRESS	
CITY-ST-ZIP TITLE		DELETE	4.4 CIT 5.1 TIT		- ZIP	☐ Change ☐ Addition
NAME		_ Dittell				Li Glange Li Addition
STREET ADDRESS			5.2 NA		nnacee	
1					ODRESS	
CITY-ST-ZIP TITLE		DELETE	5 4 CIT 6 1 TIT		- <b>a</b> P	Chance
		L'I DEFEIS				Change  Addition
NAME CTREET ADDRESS			6.2 NA		DDDE-**	
STREET ADDRESS					DDRESS	
CiTY-ST-ZIP	certify that the information supplied v	with this filing dose not applifu	for the eve			led in Section 119.07(3)(i), Florida Statutes. I further certify that the information
Indicated	on this angual report or supplications	al annuai report is true <b>and a</b> c	curate and	l iha	l my sin	anature shall have the same legal effect as if made under goth, that I am an
officer or director of the corporation of 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.						