SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: $550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $750.)

FILED
Sep 18 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT **1997**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S87890 (7)

1. Corporation Name
BEST-BUY TILE & MARBLE, INC.

[redacted]

Principal Place of Business	Mailing Address
3290 N.W. 79TH AVENUE MIAMI FL 33122	3290 N.W. 79TH AVENUE MIAMI FL 33122

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified	3a. Date of Last Report
10/17/1991	09/12/1996

4. FEI Number: 65-0316771 ☐ 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 or has paid the current year Intangible Personal Property Tax due June 30 ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt #, etc. 22	Suite, Apt #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

B & C CORPORATE SERVICES, INC.
201 SOUTH BISCAYNE BOULEVARD
SUITE 3000
MIAMI FL 33131

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

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

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PT	☐ DELETE	1.1 TITLE	PT	☒ Change ☐ Addition
NAME	MORRON, JUAN CARLOS		1.2 NAME	MONZON, JUAN CARLOS	
STREET ADDRESS	3290 NW 79TH AVE		1.3 STREET ADDRESS	3290 NW 79th Avenue	
CITY-ST-ZIP	MIAMI FL 33122		1.4 CITY-ST-ZIP	Miami, FL 33122	
TITLE	VS	☐ DELETE	2.1 TITLE	VS	☒ Change ☐ Addition
NAME	MORRON, LIZBETH		2.2 NAME	MONZON, LIZBETH	
STREET ADDRESS	3290 NW 79TH AVE		2.3 STREET ADDRESS	3290 NW 79th Avenue	
CITY-ST-ZIP	MIAMI FL 33122		2.4 CITY-ST-ZIP	Miami, FL 33122	
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4 CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP	CC 9/18	
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME	100002298031	
STREET ADDRESS			6.3 STREET ADDRESS	-09/19/97--01046--038	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	***550.00	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Se[redacted]her certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my si[redacted] 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 re[redacted], and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE: President [redacted] (305) 593-0609