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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

(4)

VALENTIN'S TILE AND MARBLE, INC.

DOCUMENT # V21855

FILED Mar 16 1998 8:00am Secretary of State

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Dringing Place	od Durinese	Marine Address				
Principal Place of Business Mailing Address				1		
4944 N PINE ISLAND RD LAUDERHILL FL 33351 US		4944 N PINE ISLAND ROAD LAUDERHILL FL 33351				
				DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified 03/18/1992	
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number	Applied For
21		[26]		65-0325995	Not Applicable	
Suite, Apt. #, etc.		Suito, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
City & State		City & State			Fee Required	
23		28 28		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	Ζφ	Count	ry	8. This corporation owes or has paid the	current year Intangible
24	25	29	30		Personal Property Tax due June 30	Yes 🗌 No
	9. Name and Address of Curr	ent Registered Agent			10. Name and Address of New Registers	d Agent
	CESCU, VALENTIN		8	1 Name		
1	4 N PINE ISLAND ROAD IDERHILL FL 33351		8	2 Street Add	ress (P.O. Box Number is Not Acceptable)	
DAG	DENNILL PL 33331		8	3		
[ļ.	4 City		. 85 Zip Code
Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Stoffice or registered agent, or both, in the State of Florida Such change wagent. Lam familiar with, and accept the obligations of, Section 607.0505			-	1,	F	L T '
	Signature typing or printed more or reputered a			gont signature requi	lred when reinstating) DATE OPEN OPEN OPEN OPEN OPEN OPEN OPEN OPEN	
12.	OF EIGERS AND DIRECTORS OFFICERS		13.		ADDITIONS/CHANGES TO OFFICERS A	Change Addition
NAME	IONCESCU, VALENTIN	בו סוננוו	1.2 NAM	ľ		CT change CT Addition
STREET ADDRESS	1904 SW 82ND AVE			ET ADDRESS		
CITY-ST-ZIP	N LAUDERDALE FL		1.3 SIND	- 1		İ
TITLE		DELETE	21 TITLE			☐ Change ☐ Addition
NAME			2 2 NAM	E		
STREET ADDRESS			23 STRE	ET ADDRESS		
CITY-ST-ZIP			2. 4 CITY	- S1 - ZIP	· .	
TRILE		☐ DELETE	3.1 TITLE	. ["		Change Addition
NAME			3.2 NAM	E		
STREET ADDRESS			3.3 STRE	ET ADDRESS		
CITY-ST-ZIP		T offers		-ST-ZIP		D Oberes D Address
TITLE		☐ DELETE	4.1 TITLE	·	6	☐ Change ☐ Addition
NAME DEDEST ADDRESS			4. 2 NAM		·	
STREET ADDRESS CITY-ST-ZIP				ET ADDRESS		
TITLE		DELETE	4.4 CITY 5.1 TITLE			Change Addition
NAME			5.2 NAM			
STREET ADDRESS				ET ADDRESS		
CITY-SI-ZIP			5.4 CITY			

14. Thereby 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 supplimental 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

6 3 STREET ADDRESS 6 4 CITY-ST-ZIP

6.2 NAME

DELETE

STREET ADDRESS

954-572-4545

☐ Change

Addition