PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS Feb 27, 1999 8:00 am Secretary of State 02-27-1999 90004 031 ***150.00

FILED

1999 DOCUMENT # V49178 1. Corporation Name

PEARSON TILE & MARBLE, INC.

Principal Place	of Business	Mailing Address			
2301 E LAS OLAS BLVD 5408 NORTHEAST FIRST AVENU FT LAUDERDALE FL 33330 FORT LAUDERDALE FL 33334 US				DO NOT WRITE IN TH	IIS SPACE
00				3. Date Incorporated or Qualifed 07/06/1992	
	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
2301	E LAS OLAS BIND	26 5 408 NE 151	AVE	65-0337875	Not Applicable
Suite, Apt.	AUD FL	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State 23 3 3 3		City & State 28 Fr LAU:) FL		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24	Country [25] V 5 47	29 3 3334 30	ountry VSA	This corporation owes the current year Personal Property Tax.	√Yes □No
Name and Address of Current Registered Agent				10. Name and Address of New Register	ad Agent
DEAG	DOON JEEEDEV I		81 Name		
	RSON, JEFFREY L. NORTHEAST FIRST AVENUE		82 Street Address (P.O. Box Number is Not Acceptable)		
FORT LAUDERDALE FL 33334			83		·
, ,	, Brooking, let 1 c cocci		63		
			84 City	F	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 a	and title if applicable (NOTE: Register	ed Agent signature require	ed when reinstating) DATE	
12.	OFFICERS AND	<u>``</u>		ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
TITLE	DP	☐ DELETE 1.1	TITLE		☐ Change ☐ Addition
NAME	PEARSON, JEFFREY L.	1.2	NAME	•	
STREET ADDRESS	5408 N.E. FIRST AVENUE	1.3	STREET ADDRESS		
CITY-ST-ZIP	FORT LAUDERDALE FL	1.4	CITY-ST-ZIP		
TITLE	DP	☐ DELETE 2.1	TITLE		☐ Change ☐ Addition
NAME	PEARSON, KAMA LINN	2.2	NAME		ĺ
STREET ADDRESS	5408 NE FIRST AVENUE	2.3	STREET ADDRESS		
CITY-ST-ZIP	FT LAUDERDALE FL	2.4	CITY-ST-ZIP		
TITLE	S	☐ DELETE 3.1	TITLE	•	Change Addition
NAME	SHULMISTER, M. ROSS		NAME		
STREET ADDRESS	3081 EAST COMMERCIAL BLVD	3.3	STREET ADDRESS	:	
CITY-ST-ZIP	FT. LAUDERDALE FL		. CITY-ST-ZIP		
TITLE	S	☐ DELETE 4.1	TITLE		☐ Change ☐ Addition
NAME	PEARSON, JACK E	4 2	NAME		
STREET ADDRESS	2301 EAST LAS OLAS BLVD	4.3	STREET ADDRESS		
CITY-ST-ZIP	FT LAUDERDALE FL		CITY-ST-ZIP		
TITLE			TITLE		Change Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		E3 0000	TITLE		☐ Change ☐ Addition
NAME			NAME	·	
STREET ANDRESS		6.3	STREET ADDRESS		

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 Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS