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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # V62400

OCEANSIDE MARBLE & TILE, INC.

Principal Place of Business

Mailing Address

3000 GREEN TURTLE PLACE MARGATE FL 33063

3060 GREEN TURTLE PLACE MARGATE FL 33063-7045

2.	Principal Place of	20.	Mailing Addres	SS	
21			26		
	Sulte, Apt. #, etc.	[Suite, Apt. #, etc.		
22			27		
	City & State		City & State		
23			28		
	Zip	Country		Zφ	Country
24		25	29		30
	9, N	lame and Address of Cu	ırrent Regis	tered Agent	
	SCHLUCHT	TER. LARRY J.			B1 Nam

7272 W. ATLANTIC BLVD. MARGATE FL 33063

4. FEI Number 65-0361096		Applied For Not Applicabl
5. Certificate of Status Desired		\$8.75 Additional Fee Required
Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees
This corporation has liability for f lorida Statutes Name and Address of New Re	Yes	□ No
ss (P.O. Box Number is Not Accepta	ble)	

3. Date incorporated or Qualified

09/04/1992

FILED

Apr 18 1997 8:00am

Secretary of State

3a. Date of Last Report

Zip Code

85

04/18/1996

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.

Street Addre

City

Si	ĠΝ	AT	(IR

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME STREET ADDRESS

12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	ý
TITLE	D DELFTE	1.1 TITLE	Change Addition	ě
NAME	NALASCO, PETER	1.2 NAME		2
STREET ADDRESS	3060 GREEN TURTLE PLACE	1.3 STREET ADDRESS		Ù
CITY-ST-ZIP	MARGATE FL	1.4 CHY+ \$1-20°		Š
TITLE	☐ DELETE	2.1 TITLE	Change Addition	C
.NAME		2.2 NAME		
STREET ADDRESS		2.3 STREET ADDRESS		
CITY-ST-ZIP		2 4 C(1Y - ST - ZIP		
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 NAMŁ		

4.3 STREET ADDRESS 4.4 CITY-S1-7IP

5.3 STREET ADDRESS

5.4 CHY - S1 - ZIP

5.1 TITLE 5.2 NAME

6.1 TITLE 6.2 NAMI

14. I do 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 it 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 12 if changed, or on an attachment with an address.

DELETE

DELETE

Change

Change

___ Addition

Addition