

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 08, 2000 8:00 am
Secretary of State

06-08-2000 90434 013 ***550.00

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DO NOT WRITE IN THIS SPACE

DOCUMENT # 628408 ✓

1. Entity Name

TRUE GRIT ABRASIVES, INC.

Principal Place of Business	Mailing Address
625 N. 50th St. Tampa, FL 33619	625 N. 50th ST. Tampa, FL 33619

2. Principal Place of Business	3. Mailing Address
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Suite, Apt. #, etc.	Suite, Apt. #, etc.
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City & State	City & State
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Zip	Country	Zip	Country
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4. FEI Number	Applied For
59-1922411	Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

Towe, Richard E.
 4210 Winding Willow Dr.
 Tampa, FL 33624

7. Name and Address of New Registered Agent

Name		
Street Address (P.O.-Box Number is Not-Acceptable)		
City	FL	Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

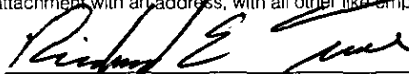
TITLE	P	<input type="checkbox"/> Delete
NAME	TOWE, Richard E.	
STREET ADDRESS	4210 Winding Willow Dr.	
CITY-ST-ZIP	Tampa, FL	
TITLE	S.	<input type="checkbox"/> Delete
NAME	MANN, Geraldine E.	
STREET ADDRESS	206 Granada Ct. North	
CITY-ST-ZIP	Plant City, FL	
TITLE	V	<input type="checkbox"/> Delete
NAME	TOWE, Richard E.	
STREET ADDRESS	4210 Windind Willow Dr.	
CITY-ST-ZIP	Tampa, FL	
TITLE	T	<input type="checkbox"/> Delete
NAME	TOWE, Joyce A.	
STREET ADDRESS	4210 Winding Willow Dr.	
CITY-ST-ZIP	Tampa, FL	
TITLE	V	<input type="checkbox"/> Delete
NAME	TOWE, Steven G.	
STREET ADDRESS	4210 Winding Willow Dr.	
CITY-ST-ZIP	Tampa, FL	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	San Juan, Micheal	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Vice President	
STREET ADDRESS	1717 E. 143RD Ave.	
CITY-ST-ZIP	Tampa, FL 33613	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

CR2E034 (9/99)

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  Richard E. Towe, President 813-247-5219

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #