2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 06, 2001 8:00 am
Secretary of State
08-06-2001 90072 039 ***550.00

A0080562

DO NOT WRITE IN THIS SPACE

DOCUMENT # M88691

1. Entity Name
Total Ceramic Tile, Inc.

Principal Place of Business	Mailing Address
	7208 Aloma Ave. Unit 100 Winter Park, FL 32792

2. Principal Place of Business		3. Mailing Address	
Orange.		7208 Aloma Ave.	
Suite, Apt. #, etc. Unit 100.		Suite, Apt. #, etc. Unit 100	
City & State Winter Park, FL		City & State Winter Park, FL	
Zip 32792	Country USA.	Zip 32792	Country USA

4. FEI Number 59-2897495 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent
Sharon Deltedesco
626 S. Econolockhatchee Trail
Orlando, FL 32825

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 Sharon Deltedesco Vice Pres. 7-30-2001
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 $550.00
After September 12, 2001 Fee will be $750.00
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			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	President Aldo Deltedesco Sr. 626 S. Econolockhatchee Tr. Orlando, FL 32825	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Vice President Sharon Deltedesco 626 S. Econolockhatchee TR Orlando, FL 32825	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
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CR2E034 (5/01)

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: Aldo Del Tedesco Aldo DelTedesco Sr Pres. 7-30-01 407-657-0056
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #