

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 21, 2003 8:00 am
Secretary of State

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AV

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1. Entity Name
D&B TILE AND RELATED ENTERPRISES, INC.

04-21-2003 90365 011 ***150.00

Principal Place of Business
**14200 N.W. 4TH STREET
SUNRISE FL 33325**

Mailing Address
**14200 N.W. 4TH STREET
SUNRISE FL 33325**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-0895629**

Applied For
Not Applicable

Zip

Country

Zip

Country

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

CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**YARBOUROUGH, HAROLD G
14200 N.W. 4TH ST
SUNRISE FL 33325**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	NAME	TITLE	NAME
DP	YARBOROUGH, DAVID A		
STREET ADDRESS	14200 N.W. 4TH STREET		
CITY-ST-ZIP	SUNRISE FL 33325		
DST	YARBOROUGH, HAROLD		
STREET ADDRESS	14200 N.W. 4TH STREET		
CITY-ST-ZIP	SUNRISE FL 33325		

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: X **Harold G. Yarborough** (Harold G. Yarborough) Secretary Date **4/1/03** Daytime Phone # **(954) 846 3662**

CR2E034 (10/02)