

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 255305

1. Entity Name

CHEM-TEX SUPPLY CORPORATION

FILED

Apr 27, 2001 8:00 am  
Secretary of State

04-27-2001 90254 014 \*\*\*150.00

Principal Place of Business

8350 N W 93RD ST  
MIAMI FL 33166-2026

Mailing Address

8350 N W 93RD ST  
MIAMI FL 33166-2026

00042037



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3901 NW 115 Ave.

Suite, Apt. #, etc.

3. Mailing Address

3901 NW 115 Ave.

Suite, Apt. #, etc.

City & State

Miami, FL

Zip

33178

Country

US

City & State

Miami, FL

Zip

33178

Country

US

4. FEI Number

59-1055281

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

Mildred Kutner

Street Address (P.O. Box Number is Not Acceptable)

3901 NW 115 Ave.

City

Miami

FL

Zip Code

33178

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)

4/13/01

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, 2001 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☐ Delete  
NAME BERMAN, DAVID M  
STREET ADDRESS 8050 SW 86TH TERR  
CITY-ST-ZIP MIAMI FL

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D ☐ Delete  
NAME RUBIN, BERNICE  
STREET ADDRESS 13740 S. W. 82ND AVE.  
CITY-ST-ZIP MIAMI FL

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D ☐ Delete  
NAME KUTNER, MILDRED  
STREET ADDRESS 3250 S. W. 18 TERR  
CITY-ST-ZIP MIAMI FL

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/13/01

Date

Daytime Phone #

CR2E034 (10/00)