

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 358440

1. Entity Name  
PREMIX-MARBLETITE MANUFACTURING CO.



**FILED**  
**Jul 14, 2003 8:00 am**  
**Secretary of State**

07-14-2003 90171 030 \*\*\*158.75

0034882 AV

Principal Place of Business  
1259 NW 21ST ST.  
POMPANO BCH FL 33069

Mailing Address  
1259 NW 21ST ST.  
POMPANO BCH FL 33069



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 59-1281165

Applied For  
Not Applicable

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

EHLER, HOWARD JR  
1259 NW 21ST ST  
POMPANO BCH FL 33069

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$550.00**  
**After September 10, 2003 Fee will be \$750.00**  
**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

TITLE PD  
NAME HASBACH, GARY  
STREET ADDRESS 1259 NW 21ST ST  
CITY-ST-ZIP POMPANO BEACH FL 33069 ☐ Delete

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

TITLE VSD  
NAME EHLER, HOWARD JR  
STREET ADDRESS 5621 SW 8TH ST  
CITY-ST-ZIP PLANTATION FL 33317 ☐ Delete

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

TITLE VP  
NAME CARR, THOMAS  
STREET ADDRESS 325 OLD SANFORD OVIEDO RD  
CITY-ST-ZIP WINTER SPRINGS FL 32708 ☒ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

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

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:

SIGNATURE REQUIRED *Howard L. Ehler, Jr*

7-10-03 (954)917-7665

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (4/03)

*Attachment*



90142369  
#35-8440  
1259 N.W. 21st Street  
Pompano Beach, Florida 33069  
(954) 917-7665  
Fax: (954) 917-2775  
(800) 432-5097

July 10, 2003

Florida Department of State  
P.O. Box 1500  
Tallahassee, Florida 32302

Dear Florida Department of State,

We are requesting waiver of the \$400.00 penalty as we did not receive the prior notice.

Thanking you in advance.

Sincerely,

A handwritten signature in black ink, appearing to read "H. Ehler" or similar, written over the word "Sincerely,".

Howard Ehler, Jr V.P.