

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 18, 2001 8:00 am
Secretary of State

07-18-2001 90261 049 ***150.00

DOCUMENT # L52835

1. Entity Name

SCOLA CUSTOM TILE, INC.

Principal Place of Business

**1635 BRANDYWINE WAY
DUNEDIN FL 34698**

Mailing Address

**1635 BRANDYWINE WAY
DUNEDIN FL 34698**

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

59-2995287

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

SCOLA, KRISTINE

**1635 BRANDYWINE WAY
DUNEDIN FL 34698**

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 \$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
P
SCOLA, LAWRENCE
1635 BRANDYWINE WAY
DUNEDIN FL ☐ Delete

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

TITLE
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SCOLA, KRISTINE
1635 BRANDYWINE WAY
DUNEDIN FL ☐ Delete

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☐ Change ☐ Addition

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

Kristine M. Scola **Kristine M. Scola** 7-12-01 727 233 8824

Date

Daytime Phone #

CR2E034 (5/01)

Attachment
Doc# L52835
CO0731051

7-12-01

Scola Custom Tile
1635 Brandywine Way
Munedin, IL 34698

To Whom It May Concern,

This form is being filed late because I never received the first notice. I spoke via telephone to a very nice woman named Kelly at the following number (850 488 9000) and she said to explain this problem in a letter and send in the amount due for May. Thank you for your time in this matter.

Sincerely,
Christine M. Scola
Sec.