

2000 UNIFORM BUSINESS REPORT (UBR)

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0168338

DOCUMENT # M24396

1. Entity Name

RODOLFO ESPINOSA-TILE CONTRACTORS, INC.

FILED

00 JUL 17 PM 3: 52

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business

Mailing Address

900 NW 29TH AVE.
MIAMI FL 33125

900 NW 29TH AVE.
MIAMI FL 33125-2923

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2610049

Applied For

- Not Applicable

Zip

Country

Zip

Country

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

**RODOLFO, ESPINOSA
3771 NW 51 ST
MIAMI FL 33142**

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 \$150.00
After MAY 1, 2000 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	DP <input type="checkbox"/> Delete
NAME	ESPINOSA, RODOLFO
STREET ADDRESS	6201 CHAPMAN FIELD DR
CITY-ST-ZIP	MIAMI FL
TITLE	VPT <input type="checkbox"/> Delete
NAME	ESPINOSA, PILAR
STREET ADDRESS	6201 CHAPMAN FIELD DR
CITY-ST-ZIP	MIAMI FL
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	900003342579--5
CITY-ST-ZIP	-08/01/00--01084--001
	****150.00 ****150.00
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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]*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: *7/09/00* Daytime Phone #: *305(613-1167)*

CR2E034 (9/99)

Binstock Rubin Ellzey and Company P.A. **Page 2 of 2**

CERTIFIED PUBLIC ACCOUNTANTS

July 6, 2000

ALEX S. BINSTOCK • CPA
RONALD E. RUBIN • CPA
RANDALL C. ELLZEY • CPA

Divisions of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, Florida 32302-1500

RE: Rodolfo Espinosa Tile Contractors, Inc.
EIN: 59-2610049
Document No: M24396

Dear Sir or Madam:

We are writing on behalf of the above-mentioned client regarding the 2000 Uniform Business Report, enclosed. Please be advised that the late filing of the report is in no way the fault of our client. A former employee of our firm misplaced this document which was located today. This is very unusual regarding our firm's policies. If you would review your records regarding the above-mentioned client you will find that they have always complied with the filing requirements.

We respectfully request abatement of late filing fee, and apologize for any inconvenience this may have caused.

Should you have any questions, please feel free to contact our office.

Very truly yours,



Alex S. Binstock, CPA

ASB:lz
Enclosures

ONE DATRAN CENTER • 9100 SOUTH DADELAND BOULEVARD • SUITE 901
MIAMI, FLORIDA 33156-7815 • TEL (305) 670-1984 • FAX (305) 670-2001

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AMERICAN INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS & FLORIDA INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS