

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 30, 2002 8:00 am
Secretary of State

09-30-2002 90181 035 ***150.00

DOCUMENT # M92784

1. Entity Name
SOUTHEAST BRICK & TILE, INC.

Principal Place of Business

**534 W STETSON ST
 ORLANDO FL 32804
 US**

Mailing Address

**534 W STETSON ST
 ORLANDO FL 32804
 US**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number **59-2905968**

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

**MURRAY, TIMOTHY
 534 STETSON ST.
 ORLANDO FL 32804**

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)

9/23/02
 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 13, 2002 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	PT	<input type="checkbox"/> Delete
NAME	MURRAY, TIMOTHY H.	
STREET ADDRESS	534 W STETSON STREET	
CITY-ST-ZIP	ORLANDO FL	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	MURRAY, DAVID A.	
STREET ADDRESS	1426 GULF TO BAY BLVD.	
CITY-ST-ZIP	CLEARWATER FL	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
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CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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 REQUIRED
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/23/02 4028437935
 Date Daytime Phone #

CR2E034 (4/02)

Attachment 678566
#1492784

Southeast Brick & Tile Inc.

TIMOTHY MURRAY
REPRESENTING
AMERICAN SUPPLY IMPORT EXPORT CO. INC.
MUTUAL MATERIALS CO.
ProSoCo, INC.

9/26/02

TO WHOM IT MAY CONCERN,
ENCLOSED PLEASE FIND A CHECK
FOR \$150⁰⁰. I DID NOT HAVE FIRST
HAND KNOWLEDGE ABOUT THIS CORPORATION
TAX UNTIL I FOUND THIS IN A FILE.
MY C.P.A. AND BOOKKEEPER WERE LET
GO THIS YEAR AND I GUESS YOU
CAN UNDERSTAND WHY, ALSO MY FATHER
WAS VERY SICK FOR THIS LAST YEAR
AND I WAS TAKING CARE OF HIM.

Sincerely,

Timothy Murray
