

AMENDED **FOR PROFIT CORPORATION**
UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 07, 2003 8:00 am
Secretary of State

02-07-2003 90112 006 ****61.25
03-07-2003 90090 022 ****97.50

DOCUMENT # *P00000095127*

1. Entity Name

MILANO TILE & MARBLE, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
5680 Schumacher Road
Suite, Apt. #, etc.

3. Mailing Address
5680 Schumacher Road
Suite, Apt. #, etc.

City & State
Sebring, Florida

City & State
Sebring, Florida

4. FEI Number
58-2580992

Applied For
Not Applicable

Zip
33872
Country
USA

Zip
33872
Country
USA

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

7. Name and Address of Current Registered Agent

Name
Clifford M. Ables, III
Street Address (P.O. Box Number is Not Acceptable)

551 South Commerce Avenue

City **Sebring,** **FL** Zip Code **33870**

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 rechartering)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
(See criteria on back) ☐

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE	President, Secretary, Treasurer, Director
NAME	Jose Ivan Ojeda
STREET ADDRESS	312 South Lotela Avenue
CITY-ST-ZIP	Avon Park, Florida 33825
TITLE	Vice-President, Director
NAME	Christina Blanco
STREET ADDRESS	312 South Lotela Avenue
CITY-ST-ZIP	Avon Park, Florida 33825
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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 on an attachment with an address, with all other like empowered.

Jose Ivan Ojeda, President

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JAN 08, 2003

Date

863-385-2002

Daytime Phone #