

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 20, 2001 8:00 am
Secretary of State

08-07-2001 90013 021 ***150.00

DOCUMENT # P0000109697

1. Entity Name
TWINS TILE INSTALLATIONS, INC.

Principal Place of Business
**26443 SW 122 PLANE
MIAMI FL 33032**

Mailing Address
**26443 SW 122 PLANE
MIAMI FL 33032**

2. Principal Place of Business
26443 SW 122 PLACE
Suite, Apt. #, etc.

3. Mailing Address
26443 SW 122 PLACE
Suite, Apt. #, etc.

City & State

Zip Country



DO NOT WRITE IN THIS SPACE

4. FEI Number **65-1079068** Applied For Not Applicable

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

6. Name and Address of Current Registered Agent
**SIERRA, ALBERTO
26443 SW 122 PLANE
MIAMI FL 33032**

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
26443 SW 122 PLACE
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 _____ (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. **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	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete SIERRA, ALBERTO 26443 SW 122 PLANE PLACE MIAMI FL 33032
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 26443 SW 122 PLACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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 filers empowered.

SIGNATURE: SIERRA, ALBERTO **SIGNATURE REQUIRED** **7/26/01** **305-257-2620**
Date Daytime Phone

CR2002 (5/01)

Attachment # F00000109697

TWINS TILE INSTALLATIONS, INC.

26443 Southwest 122nd Place
Miami, Florida 33032
(305) 257-2620

11539

July 31, 2001

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

Re: Twins Tile Installations, Inc.
2001 Uniform Business Report

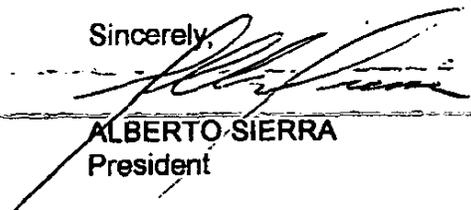
Dear Sir/Madam:

I am in receipt of the 2001 Uniform Business Report for Twins Tile Installations, Inc. Upon receipt of same, I contacted your office to inquire as to the \$550.00 filing fee and was told that this amount is due because I should have previously filed this report. Please be advised that this is first report that I receive for filing, and therefore, I am requesting that you waive the late fee.

Accordingly, I am enclosing the completed report, along with a check in the amount of \$150.00 for the filing fee.

Thank you in advance for your cooperation. If you have any questions, please feel free to contact me.

Sincerely,


ALBERTO SIERRA
President

AS:cbş
Encl.