

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 16, 2002 8:00 am
Secretary of State

01-16-2002 90235 016 ***150.00

UNIFORM
 47

DOCUMENT # P01000080794

1. Entity Name

BRAD & ANDY'S WALLCOVERINGS, INC.

Principal Place of Business

**33 SW 12TH TERRACE
 BOCA RATON FL 33486**

Mailing Address

**33 SW 12TH TERRACE
 BOCA RATON FL 33486**

00000100



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

**85 SE 4th Avenue
 Suite, Apt. #, etc.
 #104**

3. Mailing Address

**85 SE 4th Avenue
 Suite, Apt. #, etc.
 #104**

City & State

Delray Beach FL

City & State

Delray Beach FL

4. FEI Number

65-1130076

Applied For

Not Applicable

Zip

33483

Country

USA

Zip

33483

Country

USA

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**GANGALE, ANDREW A
 33 SW 12TH TERRACE
 BOCA RATON FL 33486**

7. Name and Address of New Registered Agent

Name

SAME

Street Address (P.O. Box Number is Not Acceptable)

85 SE 4th Avenue #104

City

Delray Beach

FL

Zip Code

33483

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 **Andrew Gangale - Andrew Gangale - Director**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

1-15-02

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, 2002 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

TITLE **D** ☐ Delete
 NAME **GANGALE, ANDREW A**
 STREET ADDRESS **33 SW 12TH TERRACE**
 CITY-ST-ZIP **BOCA RATON FL 33486**

TITLE **D** ☐ Delete
 NAME **TATE, BRAD S**
 STREET ADDRESS **1324 SE 2ND TERRACE**
 CITY-ST-ZIP **DEERFIELD BEACH FL 33441**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
 NAME
 STREET ADDRESS **85 SE 4th Avenue #104**
 CITY-ST-ZIP **Delray Beach, FL 33483**

TITLE ☒ Change ☐ Addition
 NAME
 STREET ADDRESS **85 SE 4th Avenue #104**
 CITY-ST-ZIP **Delray Beach, FL 33483**

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

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

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

TITLE ☐ Change ☐ 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 **Andrew Gangale - Andrew Gangale - Director**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-15-02

CR2E034 (9/01)