

FILED
Jul 11, 2002 8:00 am
Secretary of State

05-24-2002 91328 006 ***150.00

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000108351

1. Entry Name

SRM WEST, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

5685 Corporation Circle

Suite, Apt. #, etc.

Ft. Myers, FL.

City & State

3. Mailing Address

3400 NW 77th Court

Suite, Apt. #, etc.

City & State
 Miami, Florida

Zip

Country

Zip

Country

4. FEI Number

04-3629556

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

Name

Richard J. Diaz, P.A.

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

3127 Ponce de Leon Blvd.

City

Coral Gables

FL

Zip Code

33134

6. 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 fee if applicable

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

DATE

9. This corporation is eligible to satisfy its intangible tax filing requirements 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
 NAME
 STREET ADDRESS
 CITY, ST, ZIP

PDT
 FRANK TOIMIL
 3400 NW 77th Court
 Miami, Florida

TITLE
 NAME
 STREET ADDRESS
 CITY, ST, ZIP

VSD
 RUBEN PEREZ
 3400 NW 77th Court
 Miami, Florida

TITLE
 NAME
 STREET ADDRESS
 CITY, ST, ZIP

TITLE
 NAME
 STREET ADDRESS
 CITY, ST, ZIP

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 CITY, ST, ZIP

TITLE
 NAME
 STREET ADDRESS
 CITY, ST, ZIP

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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 persons empowered.

SIGNATURE:

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

DATE

Deputy Agent

CR23048 (12/01)

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

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SRM WEST, INC.

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2. Principal Place of Business

5685 Corporation Circle

3. Mailing Address

3400 NW 77th Court

Suite, Apt. #, etc.

Ft. Myers, FL.

Suite, Apt. #, etc.

City & State

Miami, Florida

Zip

Country

Zip

Country

4. FEI Number

04-3629556

Applied For
Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee RequiredDO NOT WRITE
IN THIS SPACE

7. Name and Address of Current Registered Agent

Name Richard J. Diaz, P.A.

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

3127 Ponce de Leon Blvd.

City Coral Gables

FL

Zip Code

33134

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 of person or persons named in registered agent and SEC # signature

Signature of Registered Agent (signature required when removing)

UBR-1

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	PDT	TITLE	
NAME	FRANK TOIMIL	NAME	
STREET ADDRESS	3400 NW 77th Court	STREET ADDRESS	
CITY, ST, ZIP	Miami, Florida	CITY, ST, ZIP	
TITLE	VSD	TITLE	
NAME	RUBEN PEREZ	NAME	
STREET ADDRESS	3400 NW 77th Court	STREET ADDRESS	
CITY, ST, ZIP	Miami, Florida	CITY, ST, ZIP	
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY, ST, ZIP		CITY, ST, ZIP	
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY, ST, ZIP		CITY, ST, ZIP	
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY, ST, ZIP		CITY, ST, ZIP	

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SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF BUSINESS OFFICER OR DIRECTOR

Date

United File Number

Attachment
96933

A Hachment
96933

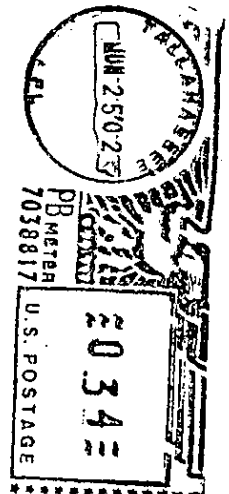
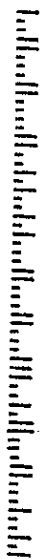
96933

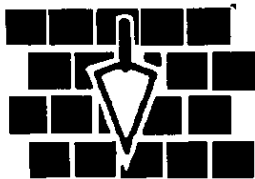
FLORIDA DEPARTMENT OF
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DIVISION
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P
Tallahassee



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS
Corporate Records
P.O. Box 6337
Tallahassee, Florida 32314

33122+1118 52





SANTA ROSA MARBLE

Attachments

96933

July 8, 2002

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Attn: Katherine Harris

Re: SRM West, Inc.
Ref. #P01000108351

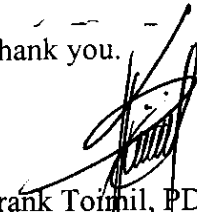
Dear Ms. Harris:

Enclosed please find the UBR report with the registered agent as requested in your June 2, 2002 letter (a copy of which is attached). However, your letter was mailed to the incorrect location making it impossible for us to meet your deadline.

I have also enclosed your letter of June 20, 2002 with a copy of your envelope postmarked June 25, 2002. Please note that the mailing address in the UBR report is correct.

If you have any questions, please do not hesitate to contact us.

Thank you.


Frank Toimil, PDT
Santa Rosa Marble

FT/bg

- International Distributors
- Ceramic Tiles
- Home Accessories
- Designer Consultants