

FILED
Jun 30, 2003 8:00 am
Secretary of State

5/15

05-15-2003 90117 015 ***150.00

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P02000027596

1. Entity Name
STAR TILE & CARPET, INC.

Principal Place of Business
10253 BROOKVILLE LANE
BOCA RATON, FL 33428

Mailing Address
10253 BROOKVILLE LANE
BOCA RATON, FL 33428

55056161

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

04-3616464

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

TAX HOUSE CORPORATION
3320 N. FEDERAL HWY
POMPAHO BEACH, FL 33064

Name
ISMAEL JOSE DA SILVA
Street Address (P.O. Box Number is not Acceptable)

10253 BROOKVILLE LN

BOCA RATON

FL 33428

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]

(NOTE: Registered Agent's signature required when changing)

5/11/03

9. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VD
DA SILVA, ISMAEL JOSE
10253 BROOKVILLE LANE
BOCA RATON, FL 33428

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
TOWENKO, PETTER M
10253 BROOKVILLE LANE
BOCA RATON, FL 33428

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Change Addition

PD
DA SILVA, ISMAEL JOSE
10253 BROOKVILLE LN
BOCA RATON, FL 33428
Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Change Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *X*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/11/03

(561)477-5614

Date

Daytime Phone #

CR2004 (10/02)

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

Attachment

0396075 AV

DOCUMENT # **P02000027596**

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STAR TILE & CARPET, INC.



Principal Place of Business
**10253 BROOKVILLE LANE
BOCA RATON FL 33428**

Mailing Address
**10253 BROOKVILLE LANE
BOCA RATON FL 33428**

55050161

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

04-3616464

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**TAX HOUSE CORPORATION
3929 N FEDERAL HWY
POMPAHO BEACH FL 33064**

7. Name and Address of New Registered Agent

Name **ISMAEL JOSE DA SILVA**
Street Address (P.O. Box Number is Not Acceptable)
10253 BROOKVILLE LN
City **BOCA RATON** FL Zip Code **33428**

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)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD DA SILVA, ISMAEL JOSE 10253 BROOKVILLE LANE BOCA RATON FL 33428	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD TOWENKO, PETTER M 10253 BROOKVILLE LANE BOCA RATON FL 33428	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DA SILVA ISMAEL JOSE 10253 BROOKVILLE LN BOCA RATON, FL-33428	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

5-11-03 561-477-5614

CR2E034 (10/02)