

2005 UNIFORM BUSINESS REPORT (UBR)

85.182

DOCUMENT# P03000109337

4/6/2005-90124-014-\$300.00-\$300.00

1. Entity Name

A&C TILE & MARBLE INSTALLATION, INC.

FILED

05 MAY 10 AM 10:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
00034101

Principal Place of Business

4334 NW 9TH AVE #9-1G
POMPANO BEACH, FL 33064

Mailing Address

4334 NW 9TH AVE #9-1G
POMPANO BEACH, FL 33064

2. Principal Place of Business

3. Mailing Address

Suite, Apt #, etc

Suite, Apt #, etc

City & State

City & State

Zip

Country

USA

Zip

Country

USA

4. FSI Number

20-0275854

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 Now Registered Agent

ANDRESSO S. FARIA
4334 NW 9TH AVE #9-1G
POMPANO BEACH, FL 33064

ANDRESSO S. FARIA

Street Address (P.O. Box Number is Not Acceptable)
4334 NW 9TH AVE #9-1G

City
POMPANO BEACH

FL

Zip Code
33064

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]

03/30/2005

DATE

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

☐

FILE NOW!! FEES \$150.00
After May 1, 2005
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
P
ANDRESSO S. FARIA
4334 NW 9TH AVE #9-1G
POMPANO BEACH, FL 33064

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

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CITY, ST, ZIP

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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

☐ Change ☐ Addition

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TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

☐ Change ☐ 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 qualified by chapter 117, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with a like empowered

SIGNATURE

[Signature]

03/30/2005

Date

Signature Phone #

ATTACHMENT

50034187

Pompano Beach, FL March 30th of 2005.

FLORIDA DEPARTMENT OF STATE
REINSTATEMENT DEPARTMENT
DIVISION OF CORPORATIONS
P.O. BOX 6327
TALLAHASSEE - FL - 32314

To Whom It May Concern:

I would like to inform you that I have a Profit Corporation by the following name:

A&C TILE & MARBLE INSTALLATION, INC.

Doc. # P03000109337

We have not received the Annual Business Report 2004 first notice to renew our corporation's name.

Now we come before this honorable Department asking to wave this penalty once we did not received the first notice and we did not know that was supposed to be renewing annually.

Was not our intention to be late with the Department State of Florida, which we honor and respect the laws and regulations.

Please accept the update form 2004 and 2005 Annual Business Report along with a checks of \$ 300.00 to pay the fee.

Thank you for your cooperation and concern, and if you have any question or concern regarding this matter, do not hesitate to contact us.

Sincerely,



Andresso S. Faria
President