

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

FILED

05 MAR 21 AM 11:11
2005
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P03000132437

1. Entity Name

Rudy's Wholesale Tile Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

7269 NW 33 St.

3. Mailing Address

7269 NW 33 St.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Miami, FL

City & State

Miami, FL

4. FEI Number

65-1209428

Applied For

Not Applicable

Zip

33122

Country

Zip

33122

Country

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name Rudolfo Molina

Street Address (P.O. Box Number is Not Acceptable)
7269 NW 33 St.

City

Miami

FL

Zip Code

33122

**DO NOT WRITE
IN THIS SPACE**

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

(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.
(See criteria on back) ☐

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25

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 D, P, S
STREET ADDRESS Molina, Rudolfo
CITY-ST-ZIP 7269 NW 33 St
Miami, FL 33122

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IN THIS SPACE**

000049891250
04/05/05-01027-001 **150.00

000049891250
04/05/05-01027-002 **150.00

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Rudolfo Molina

Rudolfo Molina - Pres 03/17/05

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)

RUDY'S WHOLESALE TILE INC.
7269 NW 33 STREET
MIAMI, FLORIDA 33122

Wednesday, March 16, 2005

Florida Department of State
Divisions of Corporations
Annual Report
P.O. Box 6327
Tallahassee, FL 32314

To Whom It May Concern:

We are writing to request a waiver on the penalties for filing the 2004 annual report late. We never received any notice from your department for the annual report for 2004 or 2005. We only found out that there was a problem when our accountant inquired if we had sent in our annual report. In their quest to obtain the 2005 annual report for us, they discovered that our company was inactive.

We are enclosing the reports for 2004 and 2005 along with the \$150.00 for each report required.

Thank you for your assistance with this matter.

Sincerely,

A handwritten signature in dark ink, appearing to read 'R. Molina', written over a horizontal line.

Rudolfo Molina
President