

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000083892

1. Entity Name

TILE AMERICA IMPORTS, INC.

FILED
Mar 04, 2000 8:00 am
Secretary of State

03-04-2000 90097 016 ***150.00

Principal Place of Business

Mailing Address

6680 N.W. 75TH PLACE
PARKLAND FL 33067

6680 N.W. 75TH PLACE
PARKLAND FL 33067-3939

2. Principal Place of Business

11717 CASTELLON CT

3. Mailing Address

11717 CASTELLON CT.

Suite, Apt. #, etc.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

BOYNTON BEACH FL

City & State

BOYNTON BEACH FL

4. FEI Number

65-0448653

Applied For

Not Applicable

Zip

33437

Country

U.S.A

Zip

33437

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

KLEIN, MICHAEL L ESQ
409 S-E 7TH ST
SUITE 501
FORT LAUDERDALE FL 33301

7. Name and Address of New Registered Agent

Name MICHAEL L KLEIN, ESQ.
Street Address (P.O. Box Number is Not Acceptable) 1005 FINE ISLAND RD SUITE 201
City PLANTATION, FL Zip Code 33324

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

2-5-00

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, 2000 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
NAME D
STREET ADDRESS HELLMAN, KENNETH
CITY-ST-ZIP 6680 N.W. 75TH PLACE 11717 CASTELLON CT
PARKLAND FL 33067 BOYNTON BEACH FL 33437

TITLE ☐ Change ☒ Addition
NAME SECY
STREET ADDRESS SHEILA HELLMAN
CITY-ST-ZIP 11717 CASTELLON CT.
BOYNTON BEACH FL 33437

TITLE ☐ Delete
NAME PVST
STREET ADDRESS HELLMAN, KENNETH
CITY-ST-ZIP 6680 N.W. 75TH PLACE 11717 CASTELLON CT.
PARKLAND FL 33067 BOYNTON BEACH, FL 33437

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

TITLE ☐ Delete
NAME SECY
STREET ADDRESS SHEILA A. HELLMAN
CITY-ST-ZIP 11717 CASTELLON CT.
BOYNTON BEACH, FL 33437

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2-05-00 (954) 975-0000

CR2E034 (9/99)