

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

7/28

FILED
Sep 17, 2003 8:00 am
Secretary of State

07-28-2003 90153 018 ***150.00

DOCUMENT # P95000064712

1. Entity Name

LUPA BRICK & TILE INC.



Principal Place of Business

**415 NE 19 AVENUE
POMPANO BEACH FL 33060
US**

Mailing Address

**415 NE 19 AVENUE
POMPANO BEACH FL 33060
US**

55056672

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 **65-0603055**

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

**FERNANDES, LUIZ
415 NE 19 AVE.
POMPANO BEACH FL 33060**

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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 \$550.00
After September 10, 2003 Fee will be \$750.00
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

TITLE **DPTS** ☐ Delete
NAME **FERNANDES, LUIZ**
STREET ADDRESS **415 NE 19TH AVENUE**
CITY-ST-ZIP **POMPANO BEACH FL**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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CITY-ST-ZIP

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:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/22/03
Date

(954) 782-3936
Daytime Phone #

CR2E034 (4/03)

Attachment
55056672
P95000064712

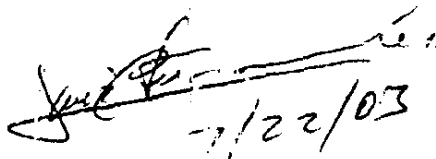
LUPA BRICK & TILE INC.

7/22/03

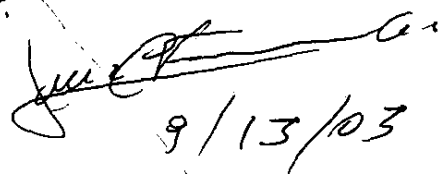
TO: J.B.R.

I HEREBY DEMAND THE PRESIDENT OF
LUPA BRICK & TILE INC. DID NOT RECEIVE
ANY PRIOR NOTICE TO FILE.
THEREFORE I AM ENCLOSING A CHECK
FOR 150.00 FOR MY ORIGINAL
FILING FEE

THANK YOU


7/22/03

THIS IS ~~A~~ A COPIE OF THE LETTER THAT
I SIGNED TO YOU ON JULY 7. I HOPE
THIS WOULD TAKE CARE OF IT.
THANK YOU AGAIN.


9/13/03