

Application For [REDACTED]

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2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000038612

1. Entity Name

MIKE SHAW TILES, INC.

Principal Place of Business

Mailing Address

1860 SW 29TH AVE APT A 1142 NW 57TH AVE
Ft LAUDERDALE FL 33312 Ft LAUDERDALE FL 33021

FILED

01 APR 30 PM 4:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA2. Principal Place of Business
6 WOODBOUND LANE3. Mailing Address
6 WOODBOUND LANE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
DEBARY FLCity & State
DEBARY FL4. FEI Number
65-0684656Applied For
Not ApplicableZip
31271

Country

Zip
31271

Country

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

PURCELL WILLAM C
633 SOUTH ANDREWS AVE.
THIRD FLOOR
Ft LAUDERDALE FL 31271Name
MIKE SHAWStreet Address (P.O. Box Number is Not Acceptable)
6 WOODBOUND LANECity FL Zip Code
Ft LAUDERDALE FL 31271

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

Mike Shaw

MIKE SHAW

Mike Shaw

4-25-2001

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) ☒FILE NOW! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State10. 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 D ☐ Delete
NAME MIKE SHAW
STREET ADDRESS 6 WOODBOUND LANE
CITY - ST - ZIP Ft LAUDERDALE FL 31271TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS 800004219588
CITY - ST - ZIP -05/16/01--01044--002TITLE ☐ Delete
NAME
STREET ADDRESS
CITY - ST - ZIPTITLE ☐ Change ☐ Addition
NAME
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CITY - ST - ZIPTITLE ☐ Delete
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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: *Mike Shaw*

MIKE SHAW

4-25-01 407-301-8106

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

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Mike Shaw Tiles, Inc.
6 Woodbound Lane
DeBary FL 32713

April 27, 2001

REINSTATEMENT SECTION
Department of State
Division of Corporations
Post Office Box 6327
Tallahassee, Florida 32314

RE: Mike Shaw Tiles, Inc.

To Whom It May Concern:

Enclosed please find an Application For Reinstatement of the Corporation of Mike Shaw Tiles, Inc. We are requesting a waiver of the late fees due to a change of address and not receiving the Corporation Annual Report.

Also enclosed please find a check for \$ 300. As filing fee.

Please file the enclosed Application For Reinstatement with the Department of State. A Certified Copy is not necessary.

Thank you for your cooperation to this matter.

Sincerely,



Mike Shaw
Director