

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000042201

1. Entity Name

BONITA CUSTOM TILE, INC.

FILED
Apr 20, 2000 8:00 am
Secretary of State

04-20-2000 90090 013 ***158.75

Principal Place of Business

79 CHARDON PLACE
NAPLES FL 34110
US

Mailing Address

79 CHARDON PLACE
NAPLES FL 34135-4556
US

2. Principal Place of Business

14848 OLD 41

3. Mailing Address

27911 HACIENDA BLVD

Suite, Apt. #, etc.

#20

Suite, Apt. #, etc.

217 B

City & State

NAPLES FL

City & State

BONITA SPRINGS, FL

4. FEI Number

65-0682696

Applied For

Not Applicable

Zip

34110

Country

USA

Zip

34135

Country

USA

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

LAGRASTA, SERGIO
79 CHARDON PLACE
NAPLES FL 34110

7. Name and Address of New Registered Agent

Name

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

27911 HACIENDA BLVD.

Unit 217 B

City BONITA SPRINGS

FL

Zip Code

34135

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)

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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

TITLE P
NAME LAGRASTA, SERGIO
STREET ADDRESS 79 CHARDON PLACE
CITY-ST-ZIP NAPLES FL 34110

☐ Delete

TITLE VPT
NAME LAGRASTA, ALICIA
STREET ADDRESS 79 CHARDON PL
CITY-ST-ZIP NAPLES FL 34110

☐ Delete

TITLE S
NAME LAGRASTA, SERGIO J
STREET ADDRESS 79 CHARDON PLACE
CITY-ST-ZIP NAPLES FL 34110

☐ Delete

TITLE TREASURER
NAME MICHAEL LAGRASTA
STREET ADDRESS 27911 HACIENDA BLVD. # 217 B
CITY-ST-ZIP BONITA SPRINGS, FL. 34135

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS 27911 HACIENDA BLVD. # 217 B
CITY-ST-ZIP BONITA SPRINGS, FL. 34135

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS 27911 HACIENDA BLVD. # 217 B
CITY-ST-ZIP BONITA SPRINGS, FL. 34135

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS 27911 HACIENDA BLVD # 217 B
CITY-ST-ZIP BONITA SPRINGS, FL. 34135

☐ Change ☐ Addition

TITLE TREASURER
NAME MICHAEL LAGRASTA
STREET ADDRESS 27911 HACIENDA BLVD # 217 B
CITY-ST-ZIP BONITA SPRINGS, FL. 34135

☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

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 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

4-15-00

Date

941-597-6171

Daytime Phone #