

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000072967

1. Entity Name

TOM'S PRECISION TILE, INC.



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

08-04-2000 90006 005 ***150.00

Principal Place of Business

517 N. UNIVERSITY DRIVE
PLANTATION FL 33324

Mailing Address

8631 N.W. 54 CT.
LAUDERHILL FL 33351

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

65-0686721

Applied For

Not Applicable

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

DONNANGELO, THOMAS P
8631 N.W. 54TH CT.
LAUDERHILL FL 33351

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.

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)

FILE NOW!!! FEE IS \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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 DONNANGELO, THOMAS P
CITY-ST-ZIP 517 N. UNIVERSITY DRIVE
PLANTATION FL 33324

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
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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 another I am empowered.

SIGNATURE:

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

7-24-00

Date

954-741-7088

Daytime Phone #

CF2E034 (5/00)

Attachment # 79600007296.

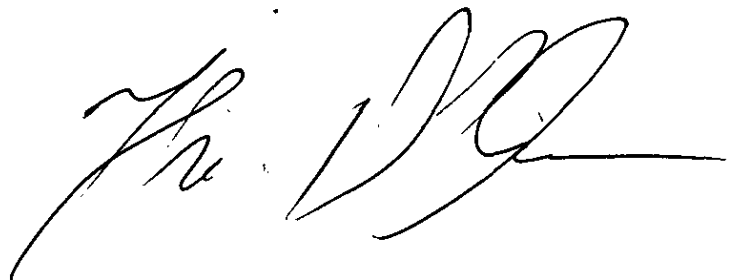
A0071396

To whom it may concern,

Toms precision tile only received a second notice to refile. We spoke with someone and they said to send a letter and a check for 150.00 to reinstate our corporation. Our mail has been going to the right street address but its been going to street instead of court. We spoke with our mail carrier and she said there's nothing she can do if she is out a new mail carrier will make those mistakes since she's not familiar with the area. I hope you can adjust this and if it is possible to write out court on our form instead of abbreviating.

Thank you for your understanding.

Thomas Donnangelo

A handwritten signature in black ink, appearing to read 'Th. Donnangelo', with a long horizontal flourish extending to the right.