## **2003 FOR PROFIT CORPORATION** UNIFORM BUSINESS REPORT (UBR

## **DOCUMENT #**

P96000074417

1. Entity Name
TILES & STONESWEST INC.



## **FILED** Feb 28, 2003 8:00 am Secretary of State

02-28-2003 90135 037 \*\*\*150.00

TILLO G OT	ONEO/WEOT, INC.							
1998 TRADE CENTER WAY, UNIT 3, STE. 105 199		Mailing Address 1998 TRADE CENTER NAPLES FL 34109	98 TRADE CENTER WAY, UNIT 3, STE, 105					
2. Principal Place of Business		3. Mailing Address		T SECTION SIN INCIDENTIFI NOTAL DESIGNATION AND AND AND AND AND AND AND AND AND AN	18811 B1011 81001 11011 1001 1001			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES			
City & State		City & State		·	4. FEI Number 65-0695310	Applied For Not Applicable		
Zip	Country	Zip	Countr	ry		\$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent			
TOMAS IOS	EΤ		ĺ	Name				
TOMAS, JOSE T 1867 NW 72 AVENUE				Street Address (P.O. Box Number is Not Acceptable)				
MIAMI FL 331			-			<u> </u>		
1715 GW 7 E 00 I						•		
•				City FL Zip Code				
8. The above nam	ned entity submits this statement	for the purpose of changing	g its registered	d office or registere	ed agent, or both, in the State of Florida. I am f	amiliar with, and accept		
trie obligations	of registered agent.							
SIGNATURE		<u> </u>						
	iture, typed or printed name of registered age	nt and title if applicable. (I	NOTE: Registered /	Agent signature required	when reinstating) DATE			
	NOW!!! FEE IS \$150.00				9. Election Campaign Financing	¢E 00		
After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State					Trust Fund Contribution.	\$5.00 May Be Added to Fees		
10.	OFFICERS AN		11.	<del></del>	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 44		
TITLE PS	Delete		TITLE		ADDITIONS/OFFICERS AND	Change Addition		
	MAS, JOSE T		NAME			C Grange C Addition		
I	S7 NW 72 AVENUE		STREET	ADDRESS				
CITY-ST-ZIP I MIA	MJ FL 33126		01777 0	T 7/D				

Afte Make Checi	r May 1, 2003 Fee will be \$550.00 k Payable to Florida Department of State			Election Campaign Financing     Trust Fund Contribution,	□ \$5.6 □ Adde	<b>)0</b> May Be d to Fees	
10.	OFFICERS AND DIRECTO	11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD TOMAS, JOSE T 1867 NW 72 AVENUE MIAMI FL 33126	☐ Delete	TITLE NAME STREET ADDRESS CITY-S1-ZIP		☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	s.	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	.c.,	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Chañge	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	,	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	Addition	
TITLE NAME		☐ Delete	TITLE		☐ Change	Addition	

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.

STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

SIGNIOSERT. RTOWNIRED SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-21-03