

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000071695

1. Entity Name

ARH SPECIALTY TILE, INC.

Principal Place of Business

204 FOXTAIL DR. UNIT A-1  
W PALM BEACH FL 33415

Mailing Address

PO BOX 541282  
LAKEWORTH FL 33454  
US

2. Principal Place of Business

3043 Pebble Beach Drive

3. Mailing Address

Suite, Apt. #, etc.

City & State

Lake Worth, FL

City & State

Zip  
33467

Country  
USA

Zip

Country

4. FEI Number

NOT APPLICABLE

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

HERNANDEZ, ALBERTO  
204 FOXTAIL DR, UNIT A-1  
W PALM BEACH FL 33415

Name

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

3043 Pebble Beach Drive

City

Lake Worth

FL

Zip Code  
33467

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 \$150.00  
After MAY 1, 2001 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

## 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

CR2E034 (10/00)

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HERNANDEZ, ALBERTO 204 FOXTAIL DR, UNIT A-1 W PALM BEACH FL 33415	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	3043 Pebble Beach Drive Lake Worth, FL 33467	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV HERNANDEZ, ELIZABETH 204 FOXTAIL DR UNIT A1 W PALM BEACH FL 33415	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	3043 Pebble Beach Drive Lake Worth, FL 33467	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> 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

Alberto Hernandez, Jr.  
President 04/01/01 561/969-9286

Date

Daytime Phone #



DO NOT WRITE IN THIS SPACE