

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000078304

1. Entity Name

TAKE OUT TILES PLUS, INC.

FILED

Mar 21, 2000 8:00 am
Secretary of State

03-21-2000 90022 021 ***158.75

Principal Place of Business

Mailing Address

887 JACKSON AVE
WINTER PARK FL 32789

887 JACKSON AVE
WINTER PARK FL 32789-4610

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3468176

Applied For

Not Applicable

Zip

Country

Zip

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

SANCHEZ, JOSE
10829 DOMINICO STREET
ORLANDO FL 32825

Name

VIERA N. PEREZ

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

10829 DOMINICO STREET

City ORLANDO

FL

Zip Code 32825

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]

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

3/15/00

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, 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Delete	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
PD	SANCHEZ, JOSE	10829 DOMINICO STREET	ORLANDO FL 32825	<input checked="" type="checkbox"/>	P	VIERA N. PEREZ	10829 DOMINICO STREET	ORLANDO, FL 32825	<input type="checkbox"/>	<input checked="" type="checkbox"/>
SVD	DELGADO, ROBERTO	10829 DOMINICO STREET	ORLANDO FL 32825	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
S	CONTRERAS, JOSE	4312 SADDLECREEK PL	ORLANDO FL 32829	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>

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] JOSE G. CONTRERAS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

3/16/00

Daytime Phone #

407-599-6767

CR2F034 (9/93)