

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **P98000004162**

1. Entity Name

SAW GRASS MARBLE & TILE, INC.

Principal Place of Business

Mailing Address

FILED
May 16, 2000 8:00 am
Secretary of State

05-16-2000 90027 029 ***150.00

00049282

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2264 SALERNO CIR.

3. Mailing Address

2264 SALERNO CIR.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

WESTON, FL.

City & State

WESTON, FL.

Zip

Country

33327 USA

Zip

Country

33327 USA

4. FEI Number

65-0810217

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ERIC F. BOSCH
2264 SALERNO CIR.
WESTON, FL. 33327

7. Name and Address of New Registered Agent

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

ERIC F. BOSCH

(NOTE: Registered Agent signature required when reinstating)

4/27/00

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, 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/S	☐ Delete
NAME	BOSCH, ERIC F.	
STREET ADDRESS	2264 SALERNO CIR	
CITY-ST-ZIP	WESTON, FL. 33327	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		☐ Change	☐ Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		☐ Change	☐ Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		☐ Change	☐ Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
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 all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ERIC F. BOSCH

Date

4/27/00

Daytime Phone #

389-6626

CR2E034 (9/99)