

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000052392

1. Entity Name
FABIANI'S TILE COMPANY

FILED
Aug 10, 2000 8:00 am
Secretary of State

08-10-2000 90012 012 ***150.00

Principal Place of Business
11120 S. TERRADAS LANE
BOCA RATON FL 33428 X

Mailing Address
11120 S. TERRADAS LANE
BOCA RATON FL 33428 X

2. Principal Place of Business
8329 TRENT CT.
Suite, Apt. #, etc. # C

3. Mailing Address
SAME
Suite, Apt. #, etc.

City & State
BOCA RATON, FL
Zip 33433 Country U.S.

City & State
Zip Country

4. FEI Number 65-0842891 Applied For X Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
TILLEM, SCOTT E
10 FAIRWAY DRIVE
SUITE 219
DEERFIELD BEACH FL 33441

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] DATE [Date]
(NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☒
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	PTSD FABIANI, RENZO 11120 S. TERRADAS LANE BOCA RATON FL 33428	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	8329 TRENT CT - C BOCA RATON, FL 33433	<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] 8-1-00 (50) 4179094
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (5/00)

Attachment Doc#:
pg 8 000052392
D057868

BOCA RATON JULY 20, 2000

Katherine Harris
Secretary of State
Florida Department of State
Division of Corporations

P.O. Box 6327
Tallahassee, Florida 32314

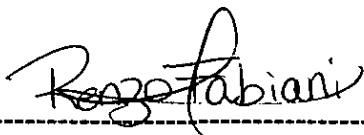
Dear Secretary of State.

... Please received the enclosed check for the amount of \$ 150 .00 Corresponding
UNIFORM BUSINESS REPORT 2000. For " Fabiani's Tile Company"

... Also I want to explain that the delay in this file was due to the address change and I never
receive previous notice for file on time.

At the current time I have provisional address at 450 W. Camino Real # 107 Boca Raton FL.
33432. And I will notify you my new address as soon I decide my new location.

Sincerely



Renzo Fabiani
President