

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000073440

1. Entity Name
EDDY TILES, INC.



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
03 OCT -1 PM 2:40

112
0043045 AV

Principal Place of Business
1530 CALAIS DRIVE
MIAMI BEACH FL 33141

Mailing Address
1530 CALAIS DRIVE
MIAMI BEACH FL 33141

REINSTATEMENT

03



10-01-03 01022 016 +65.00

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 65-0858185

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

MAQUIEIRA, EDUARDO E
1530 CALAIS DRIVE
MIAMI BEACH FL 33141

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PTD
MAQUIEIRA, EDUARDO E
1530 CALAIS DRIVE
MIAMI BEACH FL 33141 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SVD
MAQUIEIRA, EDUARDO O
1530 CALAIS DRIVE
MIAMI BEACH FL 33141 ☐ Delete

TITLE
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CITY-ST-ZIP ☐ Change ☐ Addition

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CITY-ST-ZIP ☐ Change ☐ Addition

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ 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.

SIGNATURE: SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)

Eddy Tiles, inc.
1530 Calais Dr.
Miami Beach, Fl 33141

September 25, 2003
Document#: P98000073440

On April 27, 2003 Eddy Tiles, Inc mail a check #2372 for the amount of \$150.(one hundred fifty). That check was returned because of insufficient funds. I never received a notification until this week , I called Florida Department , I was told that I could send another check for the amount of \$ 165. Please let me know as soon as you received the check.

Thanks
Eddy Tiles, Inc.