2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

P99000080032 DOCUMENT

1. Entity Name

VERSALLES CERAMIC TILE & MARBLE CORP.



FILED

Principal Place of Business 350 WEST 61 ST. HIALEAH FL 33012		350 W	Mailing Address 350 WEST 61 ST. HIALEAH FL 33012						
2. Principal Place of Business		3. Mail	3. Mailing Address			I L eg ihada dia 18116 basik ba ik abih abih abih	.MI 10111 #6111 #0107	1311 0 91 0 1 1 03 1	
Suite, Apt.	. #, etc.	Suite	Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES			
City & Stat	te	City	City & State		4.	4. FEI Number 65-0953776 Applied Fo		oplied For ot Applicable	
Zip	Country	Zip		Country	5.	Certificate of Status Desired	\$8.75 Add Fee Require		
6. Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent				
*===				Name	Name				
	NIURKA A		Street	Address (P.O.:t	Box Number is Not Acceptable)				
350 WEST				<u> </u>					
HIALEAH	FL 33012								
•	11			City		F	Zip Cod	le	
	e named entity et brille this	statement for the purpo	ose of changing its re	egistered office	or registered ac	gent, or both, in the State of Florida. I a	ım familiar with,	and accept	
	e de	پر وائد مصحصر در اور مدون							
SIGNATURE	Signature typed or triffed in the of	registered agent and title it appli	icable. (NOTE: F	Registered Agent sign	ature required when	reinstating) DAT	 _	<u></u>	
	ILE NOW IT HERE IS					1			
After	r May 1, 2003 Pee will b Payable to Florida Der	e \$550.00				Selection Campaign Financing Trust Fund Contribution.		May Be to Fees	
10.		ICERS AND DIRECTOR	RS	11.	At	ODITIONS/CHANGES TO OFFICERS A	ND DIRECTOR	S IN 11	
TITLE	P		☐ Delete	TITLE			Change	Addition	
NAME	SUAREZ, NIURKA A	•		NAME					
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12. I hereby	certify that the information s	supplied with this filing	does not qualify for th	e exemption st	ated in Section	119.07(3)(i), Florida Statutes. I further	certify that the in	nformation	

indicated on this report or supplemental report if 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 englowered 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:

SIGNA SIGNATURE AND TYPED