

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 20, 2001 8:00 am
Secretary of State
 08-20-2001 90070 012 ***550.00

0080169 AV

DOCUMENT # P99000096208

1. Entity Name

ELITE TILE AND MARBLE OF SOUTH FLORIDA, INC.

Principal Place of Business

**602 NORTH G STREET
 SUITE F
 LAKE WORTH FL 33460**

Mailing Address

**602 NORTH G STREET
 SUITE F
 LAKE WORTH FL 33460**

2. Principal Place of Business

528 A NORTH G Street

Suite, Apt. #, etc.

3. Mailing Address

528 A North G Street

Suite, Apt. #, etc.

City & State

LAKE WORTH, FL.

City & State

LAKE WORTH, FL.

Zip

33460

Country

U.S.

Zip

33460

Country

U.S.

4. FEI Number

65-0176905

Applied For

Not Applicable

5. Certificate of Status Desired

☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**DILLER, RICHARD A
 602 NORTH G STREET
 SUITE F
 LAKE WORTH FL 33460**

7. Name and Address of New Registered Agent

Name **DILLER, RICHARD A**
 Street Address (P.O. Box Number is Not Acceptable) **528 A NORTH G STREET**
 City **LAKE WORTH, FL.** FL **33460**

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  / **Richard Diller / Pres** **8/10/01**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 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 \$550.00
After September 12, 2001 Fee will be \$750.00
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	D	<input type="checkbox"/> Delete
NAME	DILLER, RICHARD A	
STREET ADDRESS	602 NORTH G STREET, SUITE F	
CITY-ST-ZIP	LAKE WORTH FL 33460	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	CHANIZO, ROBERT	
STREET ADDRESS	602 NORTH G STREET, SUITE F	
CITY-ST-ZIP	LAKE WORTH FL 33460	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	GOMEZ, AVISON	
STREET ADDRESS	602 NORTH G STREET, SUITE F	
CITY-ST-ZIP	LAKE WORTH FL 33460	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	528 A NORTH G Street	
CITY-ST-ZIP	LAKE WORTH, FL. 33460	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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 reports 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:  / **Richard Diller** **8/10/01** **561-533 9750**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034(5/01)