

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000110553

1. Entity Name

CTT INDUSTRIAL SUPPLIES, INC.

FILED

00 AUG 11 AM 8:40

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

1310 W 38 ST. 1310 W 38 ST.  
HIALEAH, FL 33012 HIALEAH, FL 33012

2. Principal Place of Business

3. Mailing Address

2480 W 80 ST. 2480 W 80 ST.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

BAY #1

BAY #1

City & State

City & State

HIALEAH, FL

HIALEAH, FL

Zip

Country

Zip

Country

33016

U.S.A.

33016

U.S.A.

4. FEI Number

65-0973731

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LUIS DE JUAN  
6340 GAUNTLET HALL LN.  
DAVIE, FL 33331

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

(NOTE: Registered Agent signature required when reinstating)

7-11-00

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE VICE PRESIDENT ☒ Delete  
NAME JAVIER HERNANDEZ  
STREET ADDRESS 4935 S.W. 98 AVE RD.  
CITY-ST-ZIP MIAMI, FL 33165

TITLE VICE PRESIDENT ☐ Change ☒ Addition  
NAME ROBERT RUIZ  
STREET ADDRESS 15501 CARRIAGE COURT.  
CITY-ST-ZIP DAVIE, FL 33331

TITLE SECRETARY ☒ Delete  
NAME RODOLFO BARRIOS  
STREET ADDRESS 151 SW 96 TERR.  
CITY-ST-ZIP PEMBROKE PINES, FL 33025

TITLE SECRETARY ☐ Change ☒ Addition  
NAME ROBERT RUIZ  
STREET ADDRESS 15501 CARRIAGE COURT.  
CITY-ST-ZIP DAVIE, FL 33331

TITLE PRESIDENT ☐ Delete  
NAME LUIS DE JUAN  
STREET ADDRESS 1310 W 38 ST.  
CITY-ST-ZIP HIALEAH, FL 33012

TITLE PRESIDENT ☒ Change ☐ Addition  
NAME LUIS DE JUAN  
STREET ADDRESS 6340 GAUNTLET HALL LN.  
CITY-ST-ZIP DAVIE, FL 33331

TITLE TREASURER ☐ Delete  
NAME LUIS DE JUAN  
STREET ADDRESS 1310 W 38 ST.  
CITY-ST-ZIP HIALEAH, FL 33012

TITLE TREASURER ☒ Change ☐ Addition  
NAME LUIS DE JUAN  
STREET ADDRESS 6340 GAUNTLET HALL LN.  
CITY-ST-ZIP DAVIE, FL 33331

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
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

7-11-00

Date

Daytime Phone #

CR2E034 (9/99)