2001 UNIFORM BUSINESS REPORT (UBR)

FILED May 04, 2001 8:00 am Secretary of State **DOCUMENT # 184179** 1. Entity Name DASH-DOOR & CLOSER SERVICE, INC. 05-04-2001 90163 029 ***150.00 Principal Place of Business Mailing Address 7801 NW 29TH ST 7801 NW 29TH ST MIAMI FL 33122 MIAMI FL 33122 738724 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-0746464 Not Applicable Zip Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name STEINER, MARTIN Street Address (P.O. Box Number is Not Acceptable) 7801 NW 29TH ST MIAMI FL 33122 Zip Code City FL 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 (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Change ☐ Addition 色り TITLE ☐ Delete TITLE STEINER.MARTIN NAME NAME 460 W. DILIDO DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI BEACH FL 33139 ☐ Addition STD TITLE ☐ Change ☐ Delete TITLE STEINER, ESTHER NAME NAME STREET ADDRESS STREET ADDRESS 460 W. DILIDO DRIVE CITY-ST-7IP CITY-ST-ZIP MIAMI BEACH FL 33139 ☐ Change [Addition 40 P TITLE TITLE Delete STEINER, JEFFREY NAME NAME STREET ADDRESS STREET ADDRESS 10480 S. W. 140TH ROAD CITY-ST-ZIP CITY-ST-ZIP 33176 MIAMI FL **Addition** ☐ Change TITLE Delete TITLE LIZASO, JUAN J L12ASo NAME 7801 NW 1934 TERRACE 7801 NW 193 STREET ADDRESS STREET ADDRESS MIANI, FL 33015 CITY-ST-7IP CITY-ST-ZIP Change ☐ Addition □ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE TITLE ☐ Delete NAME NAME

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

STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP