2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 245673 May 08, 2000 8:00 am Secretary of State 1. Entity Name COLLIER HARDWARE AND BUILDERS SUPPLY, INC. 05-08-2000 90017 047 ***150.00 Principal Place of Business Mailing Address 1970 FLORANADA ROAD NE 45TH STREET 1970 FLORANADA ROAD NE 45TH STREET OAKLAND PARK FLA 33308-5113 OAKLAND PARK FL 33308 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4, FEI Number 59-0932295 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name COLLIER JR, EARL H Street Address (P.O. Box Number is Not Acceptable) 1970 FLORANADA ROAD NE 45TH STREET FT LAUDERDALE FL 33308 Zin 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstaling) 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, 2000 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 11. OFFICERS AND DIRECTORS 12. PTD TITLE ☐ Change Addition ☐ Delete TITLE COLLIER JR, EARL H NAME NAME STREET ADDRESS STREET ADDRESS 3439 PANCHO WAY CITY-ST-ZIP CITY-ST-7IP LAKE WORTH FL ☐ Change ☐ Addition TITLE ☐ Delete COLLIER, JUDITH A NAME 3439 PANCHO WAY STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP LAKE WORTH FL Addition ☐ Change Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Delete TITLE Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS ers) CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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.

act H. Collier, JG