| DOCUMENT # 435542 1. Entity Name MARGO WALLPAPER CORPORATION | | | | | FILED SECRETARY OF STATE DIVISION OF CORPORATIONS | | | | | |
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| 2. Principal Pl | lace of Business | 3. Mailing Address | 3. Mailing Address | | | (11 11) 11111 1111 1111 1111 1111 11 | | | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | Suite, Apt. #, etc. | | | DO NOT WRITE IN THIS SPACE | | | | |
| City & State | | City & State | City & State | | | 4. FE! Number 59-1501169 Applied For | | | | |
| Zip Country | | Zip | Zip Count | | 5. Certificate of Status Desired | | n (| Not Applicable \$8.75 Additional | | |
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| | 6. Name and Address of Curr | ent Registered Agent | | Name / L | 7. Nan | D. TEFFREY | / | der rt | | 1 |
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| 8. The above named entry coopies this septement 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 registared | bost and title if applicable (NOTE | Registere | d Agent signature require | d when reinsu | king) | DATE | | | 1 |
| 9. This corpo | I FEE | IS \$150.00 | | 10. Election Campaign F | inencina | \$5.0 | May Be | 1 | | |
| | equirement and elects to do so. ia on back) | | After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of Sta | | | Trust Fund Contribut | | Adder | d to Fees | |
| 11. | | AND DIRECTORS | 12. | | _ | TIONS/CHANGES TO OF | FICERS AND | DIRECTOR | S IN 11 | - |
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| 13. I hereby of indicated | certify that the information supplied on this report or supplemental rep | with this filing does not qualify for ort is true and accurate and that m | the exe y signe | mption stated in S ture shall have the | ection 119 same leg | 0.07(3)(i), Florida Statutes al effect as if made unde | s. I further cert r oath; that I a | ny that the i m an officer | information or director | |
| 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 securate 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 at other like empowered. | | | | | | | | | | |
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