## 2000 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # **F99000002339** Apr 24, 2000 8:00 am Secretary of State MOHAWK PLASTICS INC. 04-24-2000 90014 034 \*\*\*150.00 Principal Place of Business Mailing Address 2290 AVE. L 2290 AVE. L RIVIERA BEACH FL 33404 RIVIERA BEACH FL 33404-5448 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite. Apt. #. etc. Applied For City & State City & State 4. FEI Number 04-2471737 Not Applicable Country \$8.75 Additional Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name POWELL, NATALIA M Street Address (P.O. Box Number is Not Acceptable) 2290 AVE. L **RIVIERA BEACH FL 33404** Zip Code 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing . \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ■ Addition ☐ Delete TITLE TITLE SCHREIBER, PETER NAME NAME STREET ADDRESS 1629 LOCUST STREET STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF PHILADELPHIA PA 19103 ☐ Addition Change Delete TITLE MEEHAN, ROBERT NAME STREET ADDRESS 2290 AVE. L STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **RIVIERA BEACH FL 33404** ☐ Addition ☐ Delete TITLE ☐ Change TITLE NAME DIMELING, WILLIAM R NAME STREET ADDRESS 1629 LOCUST STREET STREET ADDRESS CITY-ST-ZIP PHILADELPHIA PA 19103 CITY-ST-ZIP ☐ Addition ☐ Change Delete TITLE TITLE SCHREIBER, RICHARD R NAME NAME 1629 LOCUST STREET STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PHILADELPHIA PA 19103 President Change Addition TITLE ☐ Delete TITLE Robert Seavey 2290 Avenue L NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Riviera Beach, FL 33404 ☐ Change ☐ Addition TITLE ☐ Delete TITLE Natalia Powell NAME NAME 2290 AvenueL STREET ADDRESS STREET ADDRESS

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.

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

Riviera Beach

FL