2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
May 07, 2003 8:00 am
Secretary of State
05-07-2003 90045 002 ****50.00

DOCUMENT # L01000014816

1. Entity Name
D-ZEE TEXTILES LLC

Principal Place of Business	Mailing Address
7330 STIRLING RD 301 HOLLYWOOD FL 33024	7330 STIRLING RD 301 HOLLYWOOD FL 33024

2. Principal Place of Business		3. Mailing Address	
5624 PLUNKETT ST		5624 PLUNKETT, ST	
Suite, Apt. #, etc.: UNIT S-9-6		Suite, Apt. #, etc.: UNIT S-9-6	
City & State: HOLLYWOOD, FL		City & State: HOLLYWOOD, FL	
Zip: 33023	Country: USA	Zip: 33023	Country: USA

☑ CHECK HERE IF MAKING CHANGES

4. FEI Number 65-1137039 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
IQBAL, MOHAMMAD Z 7330 STIRLING RD APT #301 HOLLYWOOD FL 33024	Name: IQBAL, MOHAMMAD Z Street Address (P.O. Box Number is Not Acceptable): 5624 PLUNKETT ST UNIT S 9 6 City: HOLLYWOOD **FL** Zip Code: 33023

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE M. Zafar 04/28/03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $50.00
Make Check Payable to Florida Department of State
Due By May 1, 2003

9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MOHAMMAD, ZAFAR-IQBAL 7330 STIRLING RD #301 HOLLYWOOD FL 33024	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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CR2E083 (10/02)

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: M. Zafar SIGNATURE REQUIRED 04/28/03
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #