

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 01, 2001 8:00 am
Secretary of State

0121169

DOCUMENT # 396412

02-01-2001 90081 005 ***150.00

1. Entity Name

REMOCRAFT LIGHTING PRODUCTS, INC.

Principal Place of Business

Mailing Address

12870 NW 45TH AVE
 PO BOX 54 1487
 MIAMI FL 33054

12870 NW 45TH AVE
 PO BOX 54 1487
 MIAMI FL 33054

00012246



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **31-0812626**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ROBBOY, M J
12870 NW 45TH AVE
MIAMI FL 33054

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip 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 *M.J. Robboy* *M.J. Robboy* DATE **1/27/01**

Signature, typed or printed name of registered agent and title if applicable.

NOTE: Registered Agent signature required when reinstating.

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

| 11. OFFICERS AND DIRECTORS | | 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | |
|----------------------------|--|---|------|
| TITLE | NAME | TITLE | NAME |
| | CEO ROBBOY, MITCHELL J 12870 N W 45TH AVE MIAMI, FL 00000 | | |
| | D ROBBOY, STANLEY G. 5 HAMPSHIRE CT NEWPORT BEACH CA | | |
| | D REIN, WILLIAM F. 26201 RICHMOND RD. CLEVELAND OH | | |
| | S STEBNICKI, MAVIS 12870 N W 45TH AVE MIAMI, FL 00000 | | |
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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.

SIGNATURE: *M.J. Robboy*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

M.J. Robboy 1/27/00 305-687-9203
 Date Daytime Phone #

CR2E034 (10/00)