

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 24, 2000 8:00 am
Secretary of State

05-24-2000 90147 036 ***150.00

| | | | |
|---|--|---|---|
| DOCUMENT # 449572 | | | |
| 1. Entity Name | | | |
| DON M. RUTLEDGE INTERIORS, INC. | | | |
| Principal Place of Business | | Mailing Address | |
| 90 Edgewater Drive Suite 226 Coral Gables, Fl 33133 | | | |
| 2. Principal Place of Business | | 3. Mailing Address | |
| 90 Edgewater Drive | | | |
| Suite, Apt. #, etc. Suite 226 | | Suite, Apt. #, etc. | |
| City & State Coral Gables, Fl | | City & State | |
| Zip 33133 | Country Miami-Dade | Zip | Country |
| 4. FEI Number 59-1525756 | | Applied For Not Applicable | |
| 5. Certificate of Status Desired <input type="checkbox"/> | | \$8.75 Additional Fee Required | |
| 6. Name and Address of Current Registered Agent | | 7. Name and Address of New Registered Agent | |
| Don M. Rutledge 8290 S.W. 92nd Street Miami, Fl 33156 | | Name Marie E. Rutledge Street Address (P.O. Box Number is Not Acceptable) 90 Edgewater Drive, Suite 226 City Coral Gables FL Zip Code 33133 | |
| 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 <i>Marie E. Rutledge</i> Marie E. Rutledge | | x4-26-00 | |
| 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. <input type="checkbox"/> (See criteria on back) | | FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of State | |
| 10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> | | \$5.00 May Be Added to Fees | |
| 11. OFFICERS AND DIRECTORS | | 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | PTD Don M. Rutledge 90 Edgewater Drive, #226 Coral Gables, Fl 33133 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY - ST - ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | VD Marie E. Rutledge 90 Edgewater Drive, #226 Coral Gables, Fl. 33133 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY - ST - ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY - ST - ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
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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)(f), 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: <i>Marie E. Rutledge</i> Marie E. Rutledge VP 4-26-00 305-661-0500 | | | |
| SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR | | Date Daytime Phone # | |

CR2E034 (9/99)