2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Mar 11, 2002 8:00 am Secretary of State 511601 DOCUMENT # 1. Entity Name 03-11-2002 90018 019 ***150.00 MICA PRODUCTS AND WOOD OF BOCA RATON, INC. Mailing Address Principal Place of Business 150 W. GLADES ROAD 150 W. GLADES ROAD **BOCA RATON FL 33432 BOCA RATON FL 33432** 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. City & State 4. FEI Number Applied For City & State 59-1686899 Not Applicable Country \$8.75 Additional Zip Country Zip Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name HEINMILLER, GREGORY JOHN Street Address (P.O. Box Number is Not Acceptable) 720 NE LAKEVIEW TERR **BOCA RATON FL 33431** Zip Code City 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. DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible **\$5.00** May Be 10. Election Campaign Financing After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. 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. CR2E034 (9/01) RISLEY, DAVID L. **√** Change Addition VSTD TITLE TITLE ☐ Delete 1030 POINSETTIA ROAD RISLEY, DAVID L NAME NAME Correction DELRAY BEACH, FL 33183 150-W.-GLADES-ROAD :---STREET ADDRESS STREET-ADDRESS BOCA RATON, FL 00000 CITY-ST-ZIP CITY-ST-ZIP HEINMILLER, GREGORY JOHN B. Change PD ☐ Delete TITLE Addition TITLE HEIMMILLER, GREGORY JOHN NAME Correction NAME TZD NZ LAKEVIEW TERR. D720 NE LAKEVIEW TERR STREET ADDRESS STREET ADDRESS BOLA RATION, FL 33431 BOCA RATON, FL 00000 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE - - Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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.

FILED