2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 09, 2003 8:00 am
Secretary of State
06-09-2003 90114 022 ***150.00

DOCUMENT # F02000000493

1. Entity Name
~~CLEAN CONSTRUCTION ENCLOSURES, INC.~~
CLESTRA HAUSERMAN, INC.

Principal Place of Business	Mailing Address
112 PICKARD DRIVE EAST SYRACUSE NY 13211	112 PICKARD DRIVE EAST SYRACUSE NY 13211

[redacted]

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
ONE LINCOLN CENTER,	ONE LINCOLN CENTER
Suite, Apt. #, etc.: 9TH FLOOR	Suite, Apt. #, etc.: 9TH FLOOR
City & State: SYRACUSE, NY	City & State: SYRACUSE, NY
Zip: 13202 Country: US	Zip: 13202 Country: US

4. FEI Number 16-1575824 ☐ Applied For ☐ Not Applicable

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
NRAI SERVICES, INC. 526 E. PARK AVENUE TALLAHASSEE FL 32301	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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ 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
After May 1, 2003 Fee will be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P CURINCKX, ACHIEL FINANCIERE CLESTRA SA/56 RUE JEAN GIRADOUX F-67034 STRASBOURG CEDEX FR	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S BOUSQUET, LAURENCE 900 ONE LINCOLN CENTER SYRACUSE NY 13202	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T ~~DETEMPLE, HELENE~~ ~~FINANCIERE CLESTRA SA/56 RUE JEAN GIRADOUX~~ F-67034 STRASBOURG CEDEX FR	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	C DOUAY, MICHEL FINANCIERE CLESTRA SA/56 RUE JEAN GIRADOUX F-67034 STRASBOURG CEDEX FR	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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CR2E034 (10/02)

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED 4/30/2007 315-422-1994
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #