

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Jan 31, 2001 08:00 AM
Secretary of State

DOCUMENT # F95000003801

1. Entity Name
FLORIDA SUBSTRATE INC.

Principal Place of Business 711 INDUSTRIAL BOULEVARD VALDOSTA GA 31601	Mailing Address 711 INDUSTRIAL BOULEVARD VALDOSTA GA 31601
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
City & State	City & State

4. FEI Number
59-2190551

Applied For	
Not Applicable	

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD

PLANTATION FL 33324
US

7. Name and Address of New Registered Agent

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 _____ DATE **01/31/2001**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

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	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D OLIVICE GREGOIRE <input type="checkbox"/> Delete 33 RUE EMERIAU 7525 PARIS CEOEZ 15 FRANCE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP COX DAVID <input type="checkbox"/> Delete 711 GIL HARBIN INDUSTRIAL BLVD VALDOSTA GA 31601
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PRESS KHUSHOW <input type="checkbox"/> Delete 711 GIL HARBIN INDUSTRIAL BLVD VALDOSTA GA 31601
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D OLIVIER GREGOIRE MR <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 12, RUE SADI CARNOT BAGNOLET FR 93170
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V COX DAVID JMR <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 711 GIL HARBIN INDUSTRIAL BLVD VALDOSTA GA 31601
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P PRESS KHUSHROW KDR <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 711 GIL HARBIN INDUSTRIAL BLVD VALDOSTA GA 31601
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"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: JAMES H. RICHARDSON S/T **01/31/2001**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (11/00)