2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F9800001534

1. Entity Name

SUNBELT BUILDING SYSTEMS, INC.



FILED Apr 24, 2003 8:00 am Secretary of State

04-24-2003 90232 046 ***150.00

Principal Place of Business 12243 BRANDFORD STREET SUN VALLEY CA 91352				Mailing Address 12243 BRANFORD STREET SUN VALLEY CA 91352						
2. Principal Place of Business				3. Mailing Address				70 114 02101 1001 01 18	1 18111 0 181 1004	
Suite, Apt. #, etc.			Suit	Suite, Apt. #, etc.			. CHECK HERE IF MAKING CHANGES			
City & State			City	City & State			FEI Number 95-4673732	├	opplied For lot Applicable	
Zip		Country	Zip		Country	, 5.	Certificate of Status Desired	\$8.75 Ac Fee Requir		
6. Name and Address of Current I						7.	7. Name and Address of New Registered Agent			
CORPORATION SERVICE COMPANY					Name					
				Street Addres			(P.O. Box Number is Not Acceptable)			
1201 HAYS STREET										
TALLAHASSEE FL 32301										
					City			FL Zip Co		
	named entity tions of registe		for the purp	ose of changing its	registered office of	or registered ag	gent, or both, in the State of Florida.	I am familiar with	, and accept	
SIGNATURE	Signature, typed	or printed name of registered ag	ent and title il app	olicable. (NOTE	: Registered Agent signa	ature required when r	einstating)	DATE		
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00			10				Election Campaign Financin Trust Fund Contribution.		00 May Be	
		Florida Department					Trust Fund Contribution.	LI Adde	ed to rees	
10.	***	OFFICERS AN	ID DIRECTO	RS	11.	Ā	DITIONS/CHANGES TO OFFICER	S AND DIRECTOR	RS IN 11	
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		NCE AVENUE LD NJ		☐ Delete				☐ Change	☐ Addition	
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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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

APRIL 11 2003 818-896-1101

Daytime Phone #

CR2E034 (10/02