2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED Apr 25, 2001 8:00 am Secretary of State DOCUMENT # **F9900001009** 1. Entity Name PASKAL LIGHTING INC. 04-25-2001 90168 013 ***150.00 Principal Place of Business Mailing Address NAME OF THE PARTY 3126 JOHN P. CURCI DRIVE 3126 JOHN P. CURCI DRIVE BLDG 4C, BAY 4 BLDG 4C, BAY 4 PEMBROKE PARK FL 33009 PEMBROKE PARK FL 33009 2. Principal Place of Business 3. Mailing Address 3136 JOHN P. CURCI DRIVE 3136 JOHN P. CURCI DRIVE Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For PEMBROKE 95-4158132 PARK, FLORIDA PEMBROKE PARK, FLORIDA Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired 33009 U.S.A. 33009 U.S.A. Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BEARDEN, TODD BEARDEN, TODD Street Address (P.O. Box Number is Not Acceptable) 3136 50 HO P. CURCI DRINE 3126 JOHN P. CURCI DRIVE . BLDG 4C, BAY 4 PARK PEMBROKE PEMBROKE PARK FL 33009 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. 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 FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE Addition Change NAME PASKAL, JOSEPH NAME STREET ADDRESS 1135 N. MANSFIELD AVE. STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP HOLLYWOOD CA 90038 TITLE Delete TITLE ☐ Change Addition NAME PASKAL, RANDY NAME STREET ADDRESS STREET ADDRESS 1135 N. MANSFIELD AVE. CITY-ST-ZIP CITY-ST-7IP HOLLYWOOD CA 90038 TITLE ☐ Delete TITLE Change ■ Addition NAME GREEN, EVAN NAME STREET ADDRESS STREET ADDRESS 6820 ROMAINE STREET CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOOD CA 90038 TITLE Delete TITLE Change Addition NAME NEWMAN, DANA NAME STREET ADDRESS STREET ADDRESS 1135 N. MANSFIELD AVE. CITY-ST-ZIP CITY-ST-ZIP HOLLYWOODD CA 90038 TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITI F Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP erry-SI-ZIP 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 frustee 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.