FILED Apr 25, 2003 8:00 am Secretary of State

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UNIFORM BUSINESS REPORT (UBR) F99000004499 **DOCUMENT#**

2003 FOR PROFIT CORPORATION

1. Entity Name

ALLIED PLYWOOD CORPORATION



Principal Place of Business 6189 GROVEDALE COURT ALEXANDRIA VA 22310

Mailing Address 6189 GROVEDALE COURT

ALLANIONIA	FA 22310		ALEXA	NONIA VA 22310									
2. Principal Place of Business 4227 WHITING ROAD				3. Mailing Address					6 1670 100 1110 14617 1611 401		BOHL BHAIL BHAID F		
Suite, Apt. #, etc.				4937 WHIT/NG ROAD Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES					
	PARSHAU, VA MARSHAU, VA							4. FEI Number 54-0606503 Appli Not A					
Zip 201		Country FAU QUIER	1 1 · · · · · · · · · · · · · · · ·			ry 1 & U I &	e	5. Certificate of Status Desired					
6. Name and Address of Current Registered Agent							7. Name and Address of New Registered Agent						
						Name							
C T CORPORATION SYSTEM						Street Address (P.O. Box Number is Not Acceptable)							
1200 SOUTH PINE ISLAND ROAD							Street Address (F.O. Box Nutriber is Not Addeptable)						
PLANTATI(ON FL 3332	4											
						City	FL Zip Code						
8. The above	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											and accept	
	the obligations of registered agent.												
SIGNATURE .	Signature, typed	or printed name of registered agent a	nd title if appl	icable (NOTI	· Begistered	Agent signat	ure required v	when rei	inslation)	DATE		·	
		! FEE IS \$150.00	1					- 1	9. Election Campaig	n Financing	\$5.0	May Be	
	• •	3 Fee will be \$550.00 Florida Department of	Cinia					Ì	Trust Fund Contrib	oution.		to Fees	
	rayable ic								<u> </u>		·		
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12. I hereby certify that the information supplies 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 supplies ental fepol 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 flustee 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 attraction of the corporation or the receiver of the statutes and the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver of the statutes. of the corporation or the changed, or on an attack

SIGNATURE: