2000 UNIFORM BUSINESS REPORT (UBR) FILED **DOCUMENT # G06135** May 16, 2000 8:00 am 1. Entity Name Secretary of State CASTELLANOS DRAPERY HARDWARE, INC. 05-16-2000 90140 034 ***150.00 Principal Place of Business Mailing Address 111 N.W. 79TH STREET 111 N.W. 79TH STREET MIAMI FL 33150-3015 MIAMI FL 33150 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-2239862 Not Applicable Country **\$8,75** Additional Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name CASTELLANOS, RIGOBERTO Street Address (P.O. Box Number is Not Acceptable) 111 NW 79TH STREET MIAMI FL 33150 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 DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing Tax filing requirement and elects to do so (See criteria on back) After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. 11. Change ☐ Addition TITLE ☐ Delete TITLE NAME LOPEZ, MARIA T NAME STREET ADDRESS STREET ADDRESS 12801 SW 25 TERR CITY-ST-ZIP CITY-ST-ZIP MIAMI FL ☐ Addition Change ☐ Delete TITLE NAME CASTELLANOS, RIGOBERTO J NAME STREET ADDRESS STREET ADDRESS 3325 N.W. 3RD ST. CITY-ST-ZIP CITY - ST - ZIP MIAMI FL Change Addition TITLE TITLE ☐ Delete NAME NAME GALIANA, TOMAS STREET ADDRESS STREET ADDRESS 115 MADEIRAS CORAL G CITY-ST-ZIP CITY-ST-ZIP MIAMI FL ☐ Addition ☐ Change ☐ Delete TITLE NAME ISABEL, MEIZOSO 8601 N.E. 8TH CT. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI FL ☐ Change ☐ Addition ☐ Delete TITLE TITLE CASTELLANOS, RIGOBERTO S NAME NAME STREET ADDRESS STREET ADDRESS 2500 SW 6TH STREET #301 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 13. I hereby certify that the information supplied with this filling 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 trusteel impowered 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:

SIGNATURE AND

TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #