

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 21, 2003 8:00 am
Secretary of State

04-21-2003 90372 048 ***150.00

DOCUMENT # G06135

1. Entity Name
CASTELLANOS DRAPERY HARDWARE, INC.



Principal Place of Business
**111 N.W. 79TH STREET
MIAMI FL 33150**

Mailing Address
**111 N.W. 79TH STREET
MIAMI FL 33150**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-2239862**

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CASTELLANOS, RIGOBERTO
111 NW 79TH STREET
MIAMI FL 33150**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	VP	<input type="checkbox"/> Delete
NAME	LOPEZ, MARIA T	
STREET ADDRESS	12801 SW 25 TERR	
CITY-ST-ZIP	MIAMI FL	
TITLE	V	<input type="checkbox"/> Delete
NAME	CASTELLANOS, RIGOBERTO J	
STREET ADDRESS	3325 N.W. 3RD ST.	
CITY-ST-ZIP	MIAMI FL	
TITLE	S	<input type="checkbox"/> Delete
NAME	GALIANA, TOMAS	
STREET ADDRESS	115 MADEIRAS CORAL G	
CITY-ST-ZIP	MIAMI FL	
TITLE	VT	<input type="checkbox"/> Delete
NAME	ISABEL, MEIZOSO	
STREET ADDRESS	8601 N.E. 8TH CT.	
CITY-ST-ZIP	MIAMI FL	
TITLE	P	<input type="checkbox"/> Delete
NAME	CASTELLANOS, RIGOBERTO S	
STREET ADDRESS	2500 SW 6TH STREET #301	
CITY-ST-ZIP	MIAMI FL	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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 reports 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 OF SIGNING OFFICER OR DIRECTOR
(TOMAS GALIANA)

Date

Daytime Phone #

4-16-03

CR2E034 (10/02)