FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR) /

Apr 30, 2003 8:00 am Secretary of State

DOCUI	MENT # H23656			04-30-2003 90118 040 ***150.00		
Aircra	ft Interior Des	ign, Inc.				
·	DO NOT WRIT	E IN THIS SPACI				
				11028861		
2. Principal l	Place of Business	3. Mailing Address				
623 Radar Road 623 Radar Ro		Road				
Suite, Apt. #, etc. Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE			
C/o Corp Finance C/o Corp Finance City & State		inance	4. FEI Number	Applied For		
	oro, N.C	Greensboro	N.C	59-2449132	Not Applicable	
Zip	Country	Zip	Country	5. Certificate of Status Desired	\$8.75 Additional	
27410	DO NOT WRITE IN T	127410 HIS SPACE	l	7. Name and Address of Current Regist	Fee Required	
DO NOT WRITE IN THIS SPACE			Name	Name		
			CTC	C T Corporation System Street Address (P.O. Box Number is Not Acceptable)		
			1200	1200 South Pine Island Road		
	*					
	· •		City		Zip Code	
			Plant	ation F	- 12225 1	
	e named entity submits this stateme of the obligations of registered agent	• • •	ing its registered office	e or registered agent, or both, in the State of Fl	orida. I am familiar with,	
SIGNATURE	Signature, typed or printed name of regis	stered agent and title if applicat	ole. (NOTE: Registe	ed Agent signature required when reinstating)	DATE	
	nuary 1 - May 1 Fee is \$150.00			9 Floation Compaign Financing	\$5.00 May Be	
	After May 1, Fee is \$550.00 Amended UBR is \$61.25			Election Campaign Financing Trust Fund Contribution.	Added to Fees	
	Payable to Florida Department o					
10.	OFFICERS AND	DIRECTORS	- 		[§	
TITLE NAME	Chairman & CEO Rimmer, Roy T.		TITLE NAME	T.	Ĭ	
STREET ADDRESS			STREET ADDRESS	· · · · · · · · · · · · · · · · · · ·		
CITY - ST - ZIP	Greensboro, N.C	27410	CITY - ST - ZIP			
TITLE	President & COC)	ΠNE		· 6	
NAME	, · · - · - · · · ·		NAME		1	
STREET ADDRESS CITY - ST - ZIP			STREET ADORESS CITY - ST - ZIP			
TITLE	CFO & Executive Vice President					
NAME	Campbell, C. Robert		NAME	`		
STREET ADDRESS 623 Radar Road		STREET ADDRESS	•			
CITY - ST - ZIP			CITY - ST - ZIP	DO NOT WRITE IN TH	DO NOT WRITE IN THIS SPACE	
TITLE						
NAME PIROZZI, Francis X. STREET ADDRESS 623 Radar Road			NAME STREET ADDRESS			
Greensboro, N.C. 27410			CITY - ST - ZIP			
TITLE	Secretary		TITLE			
NAME	Schwartz, Phili		NAME	• .		
			STREET ADDRESS CITY - ST - ZIP			
CITY - ST - ZIP		ነ ማግለበጥ			l l	
TITE .	Greensboro, N.C	27410				
TITLE NAME	Greensboro, N.C	C. 27410	ППЕ		,	
TITLE NAME STREET ADDRESS	Greensboro, N.C	C. 27410		en e	,	

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Francis X. Pirozzi SIGNATURE AND TYPEDOR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(336) 668-4410 Date

Daytime Phone #