2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR) H73428 **DOCUMENT #** 1. Entity Name STOCK DOOR & TRIM, INC.



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

07-21-2003 90125 031 ***550.00

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S. Certificate of Status Desired Fee Required T. Name and Address of New Registered Agent CIT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND RD. PLANTATION FL 33324 City FL Zap 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, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE FUL Zap Code SIGNATURE Full ROWN!! FEE IS \$55.00 After September 10, 2003 Fee will be \$750.00 After Sept	City & State		City & State		4. FEI Number 59-2577859	<u> </u>	
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Street Address (P.O. Box Number is Not Acceptable) Street Address (P.O. Box Number is Not Acceptable) City FL Zio Code		6. Name and Address of Current Ro	egistered Agent		7. Name and Address of New Registered Agent		
1200 SOUTH PINE ISLAND RD. PLANTATION FL 33324 City FL Zip Code				Name_	Name		
PLANTATION FL 33324 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 FILE NOW!! FEE IS \$55.0.00 After September 10, 2003 Fee will be \$750.00 Make Check Physible to Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN MAKE HORD, FENTON N MR 403 BLAND ROAD STREET ADDRESS CITY-51-ZP RALEIGH NC 27609 TITLE NAME VST OPBINIETTE, GARY E MR STREET ADDRESS CITY-51-ZP TITLE NAME STREE				Street Address (P.O. Box Number is Not Acceptable)			
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 File Now!!! FEE IS \$550.00					· · · · · · · · · · · · · · · · · · ·		
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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 Block 11 if changed, or on an attachment with an add

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

Date

Daytime Phone #