2001 UNIFORM BUSINESS REPORT (UBR)

FILED Jan 25, 2001 8:00 am Secretary of State **DOCUMENT # L17939** 1. Entity Name DRAPERIES & BLINDS UNLIMITED, INC. 01-25-2001 90115 014 ***150.00 Principal Place of Business Mailing Address 624 S. FEDERAL HWY. 624 S. FEDERAL HWY. DEERFIELD BCH. FL 33441 DEERFIELD BCH. FL 33441 608187 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 65-0149107 Not Applicable Zip Country Zip \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6.:: Name and Address of Current Registered Agent-VIGORITA VIGORITA, F.LOURS VOUIS, VIGERITA F Street Address (P.O. Box Number is Not Acceptable) 624 S FEDERAL HWY **DEERFIELD BEACH FL 33441** Zip Code FL 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 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. 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 11. 12. ☐ Change ☐ Addition TITLE TITLE ☐ Delete VIGORITA, F. LOUIS NAME NAME STREET ADDRESS STREET ADDRESS 624 S. FEDERAL HWY CITY-ST-ZIP CITY-ST-ZIP **DEERFIELD BEACH FL 33441** ☐ Change ☐ Addition TITLE ☐ Delete TITLE COURIER, JACLYN NAME COORIER, JACLYN NAME STREET ADDRESS 3057 NW 78TH AVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **COCONUT CREEK FL 33063** Delete --TITLE -بالناء المالعات بالمام والمام أغيبانييوري الرووم Change ☐ Addition TITLE NAME COURIER, SCOTT R. NAME STREET ADDRESS 3057 NW 48TH AVENUE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **COCONUT CREEK FL** Change ☐ Addition ... Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered OUNS VIGORITA SIGNATURE: