

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L91500

1. Entity Name

PRIME DESIGNS AND SURFACES, INC.

FILED
Jun 08, 2000 8:00 am
Secretary of State

06-08-2000 90012 042 ***150.00

Principal Place of Business

Mailing Address

1565A NW 88TH AVE
 MIAMI FL 33172
 US

P.O. BOX 432345
 MIAMI FL 33243-2345
 US

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 65-0218214

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

POTAMOS, JAMES F
 6604 TARREGA ST
 CORAL GABLES FL 33146

Name

Street Address (P.O. Box Number is Not Acceptable)

10985 SW 107th ST. #314

City

MIAMI

FL

Zip Code

33176

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 *James F. Potamos*
 Signature, typed or printed name of registered agent and title if applicable.

JAMES F. POTAMOS

26 MAY 2000

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PTD ☐ Delete
 NAME POTAMOS, JAMES F
 STREET ADDRESS 6604 TARREGA ST.
 CITY-ST-ZIP CORAL GABLES FL 33146

TITLE ☒ Change ☐ Addition
 NAME PO. Box 0724 (see below)
 STREET ADDRESS MIAMI, FL 33243-0724
 CITY-ST-ZIP

TITLE ~~VSD~~ ☒ Delete
 NAME ~~POTAMOS, SONIA E~~
 STREET ADDRESS ~~6604 TARREGA ST.~~
 CITY-ST-ZIP ~~CORAL GABLES FL 33146~~

TITLE ☒ Change ☐ Addition
 NAME JAMES F. POTAMOS
 STREET ADDRESS 10985 SW 107th ST. #314
 CITY-ST-ZIP MIAMI, FL 33146

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 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.

SIGNATURE *James F. Potamos*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

JAMES F. POTAMOS 26 MAY 2000 305/412-3383

CR2E334 (9/99)