2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

M25139 DOCUMENT

1. Entity Name

LOUIS POULSEN LIGHTING INC.



FILED Jan 15, 2003 8:00 am Secretary of State 01-15-2003 90173 030 ***150.00

Principal Place of Business 3260 MERIDIAN PARKWAY FT LAUDERDALE FL 33331 US			Mailing Address 3260 MERIDIAN PARKWAY FT LAUDERDALE FL 33331 US								
2. Principal Place of Business			3. Mailing Address						1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 	arari aran real	
Suite, Apt. #, etc.			:Suite, Apt-#, etc:			-	☐ CHECK HERE IF MAKING CHANGES				
City & State			City & State			- 4	4. FEI Number 59-2618145 Applied For Not Applicable				
Zip Country			Zip	ntry	5	5. Certificate of Status Desired S8.75 Additional Fee Required					
	6. Name	and Address of Current i	Registered Agent	Щ	T	7	7. Name and Address of New I				┩
		·		Name							
PEDERSE	n, kent s					(5.6					
3260 MER	iidian PKWY		Street Addr			ess (P.O	s (P.O. Box Number is Not Acceptable)				
FT. LAUDE	ERDALE FL 3	3331	-					***	 -	 	-
					City			FL	Zip Cod	de	1
8. The above	named entity	submits this statement for	the purpose of changing its	register	ed office or regi	istered a	agent, or both, in the State of Flo	orida. I am fai	niliar with	and accent	\dashv
the obligat	tions of registe	red agent.			Ū		• ,		riinai witi	, and abcopt	
SIGNATURE											
5,610 11 51 12		printed name of registered agent a	nd title if applicable. (NOT	E: Registere	d Agent signature req	quired when	en reinstating)	DATE	·		
F	II E NOWIII	FEE IS \$150.00				 -					-
		Fee will be \$550.00					9. Election Campaign Fir Trust Fund Contributio	nancing	\$5.0)0 May Be	l
Make Checi	k Payable to	Florida Department of	State	-			Trust Fund Contributio	n	Adde	d to Fees	
10. OFFICERS AND I			IRECTORS 11,				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11				
TITLE	PTS		☐ Delete	-	TITLE		ADDITIONS/CHANGES TO OFF				ہ ⊢
NAME	PEDERSEN,	KENT S	O Doloto	NAMI	- 1			ŗ	Change	Addition	2
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NAME	HOLM, ERIK		NAME					L] Change	☐ Addition	1
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NAME	LINDEBERG, HANS				AME			. L	_ Griange	☐ Addition	
	DESC MENTALLINA		ST		TREET ADDRESS						-
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CITY-ST-ZIP				CITY-S	ľ						
of the corp	oration or the r	eceiver or trustee empow					n 119.07(3)(i), Florida Statutes. I e legal effect as if made under or rida Statutes; and that my name				

SIGNATURE: _

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #