

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# M58815

FILED  
Feb 12, 2002 8:00 AM  
Secretary of State

Entity Name: MEYER LAMINATES, INC.

## Current Principal Place of Business:

1900 AUSTRALIAN AVE  
2ND FLOOR  
RIVIERA BEACH, FL 33404

## New Principal Place of Business:

## Current Mailing Address:

1900 AUSTRALIAN AVE  
2ND FLOOR  
RIVIERA BEACH, FL 33404

## New Mailing Address:

FEI Number: 65-0021341

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND RD.  
PLANTATION, FL 33324 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: STVD ( ) Delete  
Name: SULLIVAN, DAVID,  
Address: 1900 AUSTRALIAN AVE., 2ND FLOOR  
City-St-Zip: RIVIERA BCH, FL

Title: PD ( ) Delete  
Name: FEDDEN, HIM  
Address: 1900 AUSTRALIAN AVENUE 2ND FLOOR  
City-St-Zip: RIVERA BEACH, FL

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: SULLIVAN, DAVID  
Address: 1900 AUSTRALIAN AVE., 2ND FLOOR  
City-St-Zip: RIVIERA BCH, FL 33404

Title: DVP (X) Change ( ) Addition  
Name: DE CHALENDAR, PIERRE-ANDRE  
Address: 1900 AUSTRALIAN AVENUE 2ND FLOOR  
City-St-Zip: RIVERA BEACH, FL 33404

Title: DST ( ) Change (X) Addition  
Name: SABLE, JACK  
Address: 330 PATTON DRIVE SW  
City-St-Zip: ATLANTA, GA 30336

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JACK SABLE

DST

02/12/2002

Electronic Signature of Signing Officer or Director

Date