

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# M58815

FILED
Apr 21, 2003
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:

8895 N. MILITARY TRAIL
SUITE C-200
PALM BEACH GARDENS, FL 33410

Current Mailing Address:

1900 AUSTRALIAN AVE
2ND FLOOR
RIVIERA BEACH, FL 33404

New Mailing Address:

8895 N. MILITARY TRAIL
SUITE C-200
PALM BEACH GARDENS, FL 33410

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

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

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: SULLIVAN, DAVID
Address: 8895 N. MILITARY TRAIL, SUITE C-200
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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

04/21/2003

Electronic Signature of Signing Officer or Director

Date