2002 UNIFORM BUSINESS REPORT (UBR)

Apr 30, 2002 8:00 am § Secretary of State DOCUMENT # M63304 1. Entity Name 04-30-2002 90191 020 ***150 VILLAGE CERAMICS, INC. Principal Place of Business Mailing Address 1314 S FIELDLARK LANE 1314 S FIELDLARK LANE HOMESTEAD FL 33035 HOMESTEAD FL 33035 Mailing Address Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State FI eas 65-0021471 Homestead Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name BERGERON, REBECCA Street Address (P.O. Box Number is Not Acceptable) 1314 FIELD LARK S. **HOMESTEAD FL 33035** Zip Code City 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150,00 10.-Election-Campaign:Financing \$5.00 May Be After May 1, 2002 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. OFFICERS AND DIRECTORS 11. CR2E034 (9/01) .Change Addition ☐ Delete TITLE TITLE NAME NAME BERGERON, PAUL STREET ADDRESS 1314 S. FIELDLARK LIN STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **HOMESTEAD FL 33035** Change Addition ☐ Delete TITLE TITLE NAME BERGERON, BECKY STREET ADDRESS STREET ADDRESS 1314 S. FIELDLARK LN CITY-ST-ZIP CITY-ST-ZIP HOMESTEAD FL 33035 ☐ Addition ☐ Change ☐ Delete TITL F NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP □ Change ☐ Addition TITLE ☐ Delete THILE NAME NAME STREET ADDRESS STREET ADDRESS

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 Bergeron

CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

TITLE

NAME

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME STREET ADDRESS

Delete

Addition

☐ Change