2001 UNIFORM BUSINESS REPORT (UBR)

FILED Mar 05, 2001 8:00 am DOCUMENT # P00000017718 Secretary of State C&R DECORATIVE SURFACES, INC. 03-05-2001 90334 004 ***150.00 Principal Place of Business Mailing Address 120 PARK STREET, NORTH 120 PARK STREET, NORTH ST. PETERSBURG FL 33710 ST. PETERSBURG FL 33710 2. Principal Place of Business 3. Mailing Address 8926 N. Armenia Ave 8926 N. Armenia Ave. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For AMPA 59-362662 Not Applicable PAMDA Country \$8.75 Additional 5. Certificate of Status Desired U.S.A. Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Kodney Johnson JOHNSON, RODNEY Street Address (P.O. Box Number is Not Acceptable 120 PARK STREET NORTH ST. PETERSBURG FL 33710 8926 N. Armenia Ave. 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. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 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 11. OFFICERS AND DIRECTORS President TITLE ☐ Delete TITLE ☐ Change Kim B. Wong NAME NAME STREET ADDRESS STREET ADDRESS 8926 N. Armenia Ave. CITY-ST-ZIP CITY-ST-ZIP TAMPA, F1. 33604 U. Pres., Socy, Treas. Rodney J. Johnson 8926 N. Armenia Ave. ☐ Delete ☐ Change TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS TAMDA, F1. 33604 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Delete TITI F Change TITLE NAME -NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS 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. Johnson V.P. 3.2-01