2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P0000071790 1. Entity Name BUILDING MATERIAL SUPPLIES, CORP. Principal Place of Business Mailing Address 16804 SW 80 CT MIAMI FL 33157 MIAMI FL 33157

FILED Apr 24, 2001 8:00 am Secretary of State

04-24-2001 90245 043 ***150.00

2. Findings Place of Business 3. Mailing Address 3. Mailing Address 4. Suits 4. Suit	16804 SW 80 CT MIAMI FL 33157		16804 SW 80 CT MIAMI FL 33157									
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S. Centimate of Status Delaired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Steed Address (P.O. Box Number is Not Acceptable) City L. FL Zip Code 8. The above named entity submits this statement for the purpose of changing its registered Agent office or registered agent, or both, in the State of Porida. SIGNATURE SIGNATURE Signara, bloads primed over all registered agent and tour at spatiated agent and tour at spatiated agent and tour at spatiated agent and adects to do so. After MAY 1, 2001 Fee will be \$550.00 After MAY 1, 2001 Fee	Oily d Stat		——————————————————————————————————————				4. FE					
SANCHEZ, ISABEL MARIA 18804 SW 80 CT MIAMI FL 33157 City : FL Zip Code 8. The above named entity submits this statement for the purpose of changing its registered Agent, or both, in the State of Forida. SIGNATURE 9. This corporation is eligible to satisfy its intangible Task filling requirement and elects to do so. (Size criteria on back) FILE NOW!! FEE S \$15.00 and Mark 71, 2001 Fee will be \$55.00 and Mark 71, 2001 Fee will be \$55.00 and Mark 71, 2001 Fee will be \$55.00 and Mark Check Payable to Department of State 11. OFFICERS AND DIRECTORS SANCHEZ, ISABEL MARIA SIRRET AUDRES CITY-ST-2P ADDITIONS/CHANGES TO CYFICERS AND DIRECTORS IN SIRRET AUDRES CITY-ST-2P FILE MAMI FL 33157 FILE Delete TITLE MAMI SIRRET AUDRESS CITY-ST-2P FILE MAMI SIRRET AUDRESS CITY-ST-2P FILE Delete TITLE Delete TITLE MAMI SIRRET AUDRESS CITY-ST-2P FILE Delete TITLE DELETE DEL	Zip	Country	Zip	Coun	try		5. Ce	ertificate of Status Desired				
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Street Address (P.O. Box Number is Not Acceptable) Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code City FL Zip Code 6. 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 Segment, bead or preed remark of registered agent and stop a supplicable. (NOTE Registered Agent segment registered agent, or both. In the State of Florida. STORN TURE Segment, bead or preed remark of registered agent and stop a supplicable. (NOTE Registered Agent segment registered agent, or both. In the State of Florida. STORN TURE Segment, bead or preed remark of registered agent and stop a supplicable. (NOTE Registered Agents Sto.00 After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of State 10. Election Campaign Financing Trans Fund Contribution. STORN TURE AGENTS THE DESTRUCTION STORN AGENT OF FICERS AND DIRECTORS IN 11 THE NAME STRET AGENTS CITY-ST-2P THE DESTRUCTION STORN AGENT OF FICERS AND DIRECTORS IN 11 THE NAME STRET AGENTS CITY-ST-2P THE NA												
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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 Signature, your or primed name of registering agent and tis of applicable. INCITE: Registered Apent signature requirement remaining DATE	}				City	.			Ei	Zip Cod	de et	
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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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

04-15-01 (305) 234-0696

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