## 2001 UNIFORM BUSINESS REPORT (UBR) FILED Feb 13, 2001 08:00 AM DOCUMENT # P0000073428 1. Entity Name **Secretary of State** ARTHUR RUTENBERG DESIGNS, INC. Principal Place of Business Mailing Address 13922 58TH STREET NORTH 13922 58TH STREET NORTH CLEARWATER FL CLEARWATER FL 33760 33760 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent GARTON 13922 58TH STREET NORTH Street Address (P.O. Box Number is Not Acceptable) CLEARWATER FL33760 Zip Code 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. 02/13/2001 Signature, typed or printed name of registered agent and title if applicable, (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing After MAY 1, 2001 Fee will be \$550.00 \$5.00 May Be 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 OFFICERS AND DIRECTORS 11. 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE X Addition ☐ Change MAME NAME GARTON LORI STREET ADDRESS 13922 58TH STREET NORTH STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CLEARWATER ☐ Delete TITLE VP ☐ Change X Addition NAME NAME JAGHAB RAJA STREET ADDRESS STREET ADDRESS 13922 58TH STREET NORTH CITY-ST-ZIP CITY-ST-ZIP CLEARWATER FL33760 ☐ Delete TITLE ☐ Change X Addition NAME RUTENBERG BARRY STREET ADDRESS STREET ADDRESS 13922 58TH STREET NORTH CITY-ST-ZIP CITY-ST-ZIP CLEARWATER 33760 FL. ☐ Delete TITLE Change ☐ Addition ARTHUR RUTENBERG NAME STREET ADDRESS 13922 58TH STREET NORTH STREET ADDRESS CITY-ST-ZIP CLEARWATER 33760 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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.

SIGNATURE: \_LORI GARTON

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

02/13/2001

Date Daytime Phone # CR2E034 (11/00)