2001 UNIFORM BUSINESS REPORT (UBR)

FILED Mar 26, 2001 8:00 am Secretary of State DOCUMENT # P00000102009 PRESTIGE MICA AND CABINETS CORPORATION 03-26-2001 90135 011 ***150.00 Principal Place of Business Mailing Address 3685 Inwostmant-Language Concre 181 MARTIN CIRCLE ROYAL PALM BEACH FL 394H Uni + 5 ROYAL-PALM BEACH FL Rivioralbeach, PL33404 Principal Place of Business DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For Not Applicable Čountry \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent KELLY, MAXINE Box Number is Not Acceptable) **181 MARTIN CIRCLE ROYAL PALM BEACH FL 33411** this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. 8. The above name SIGNATURE 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 12. Yrosiller+ ☐ Addition □ Delete TITLE D Richard NAME HILL, RICH STREET ADDRESS STREET ADDRESS **181 MARTIN CIRCLE** CITY-ST-ZIP CITY-ST-ZIP ROYAL PALM BEACH FL 33411 ☐ Addition TITLE X Delete NAME KELLY, JOHN STREET ADDRESS STREET ADDRESS **181 MARTIN CIRCLE** CITY-ST-ZIP CITY-ST-ZIP ROYAL PALM BEACH FL 33411 ☐ Change -Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS City-ST-7IP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS

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

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