# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**
**Jun 23, 2003 8:00 am**
**Secretary of State**
05-05-2003 91775 014 ***158.75

55049436

DOCUMENT # P01000072342

1. Entity Name
LORD OF THE RUGS INC.

| Principal Place of Business | Mailing Address |
|---|---|
| 2114 WAVERLY PLACE<br>MELBOURNE FL 32901 | 2114 WAVERLY PLACE<br>MELBOURNE FL 32901 |

[redacted]

☐ CHECK HERE IF MAKING CHANGES

| 2. Principal Place of Business | 3. Mailing Address |
|---|---|
| 2114 WAVERLY PL<br>Suite, Apt. #, etc. | 2114 WAVERLY PL<br>Suite, Apt. #, etc. |
| City & State: Melbourne FL | City & State: Melbourne FL |
| Zip: 32901 Country: BREVARD | Zip: 32901 Country: BREVARD |

4. FEI Number 59-3736801 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

CASEY, DAVID
2114 WAVERLY PLACE
MELBOURNE FL 32901

7. Name and Address of New Registered Agent

Name: DAVID CASEY
Street Address (P.O. Box Number is Not Acceptable): 2114 WAVERLY PL
City: Melb FL Zip Code: 32901

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: David Casey 4-30-02
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS $150.00**
***After May 1, 2003 Fee will be $550.00***
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

| 10. OFFICERS AND DIRECTORS | | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | |
|---|---|---|---|---|
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | D<br>CASEY, TERRENCE P<br>108 W. 80TH ST., APT. #8<br>NEW YORK NY 10024 | ☐ Delete | PRESIDENT<br>Terrence Casey<br>282 CABRINI BLVD #2K<br>N.Y. N.Y. 10033 | ☒ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | D<br>CASEY, DAVID<br>2114 WAVERLY PLACE<br>MELBOURNE FL 32901 | ☐ Delete | AGENT<br>DAVID CASEY<br>2114 WAVERLY PL<br>Melb. FL 32901 | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Delete | | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Delete | | ☐ Change ☐ Addition |
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CR2E034 (10/02)

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** SIGNATURE REQUIRED Terrence Casey 4/30/03 212/781/0718
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Sign