2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR) P01000073686

DOCUMENT # 1. Entity Name



FILED Mar 26, 2003 8:00 am Secretary of State

03-26-2003 90149 038 ***150.00

KAZOUL 125 GENERAL CARPENTRY, INC.									
Principal Place of Business 110 NE 152 ST. NORTH MIAM BEACH FL 33162		Mailing Address 110 NE 152 ST. NORTH MIAM BEACH FL 33162					4 (1884) 884 (14) 884 (1844) 884 (1884) 884 (1884) 884 (1884)		1 0 11 6 11 100
2. Principal P	ace of Business	3. Maili	ng Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES			
City & State		City & State				4. FE	04-3654088		pplied For at Applicable
Zip	Country	Zip		Country		5 . Ce		\$8.75 Add	
	☐6. Name and Address of Current F	l Registere	d Agent			7. Na	me and Address of New Registered A		
	WE Nous	io /.	Fishin	nene. Name			e de la composición	الموادم والموسان	
Street Address (P.O. Box Number is Not Acceptable)									•
BISCAYNE GARDENS FL 33162									
DISCATINE	GANDENS FL 33102		Λ	City				I Zin Cod	
	V-		<u> </u>	City			<u>FL</u>	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. I am familiar with, and accept the obligations of registered agent.									
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SIGNATURE .	Signature, typed or printed name of registered agent ar	nd title if appli	cable. (NOTE	E: Registered Agent signati	ure required	when rein:	stating) DATE		
· FI	LE NOW!!! FEE IS \$150.00						O Clarking Orangeing Circuits	<u></u>	0
After	May 1, 2003 Fee will be \$550.00 Payable to Florida Department of	State				Election Campaign Financing Trust Fund Contribution.		O May Be i to Fees	
10.	OFFICERS AND D	DIRECTOR		11.	1	ADD	ITIONS/CHANGES TO OFFICERS AND		
TITLE NAME	P		Delete	TITLE NAME	No	YC	ひん こくだかとりやと.	L Change	☐ Addition
STREET ADDRESS	110 NE 152 ST.			STREET ADDRESS	110	iN	E 1152 nd Street	-	
CITY-ST-ZIP	NORTH MIAM BEACH FL 33162			CITY-ST-ZIP	Bi	<u>SCi</u>		L33	162
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TITLE			☐ Delete	TITLE			· · · · · · · · · · · · · · · · · · ·	Change	☐ Addition
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NAME				NAME				•	_
STREET ADDRESS				STREET ADDRESS					
CITY-ST-ZIP	ertify that the information supplied with	thin filing	doos not qualify for	CITY-ST-ZIP	lad in Sa	ction 11	IQ 07/3\/i\ Florida Statutes I further cert	ify that the in	formation

referby Certify that the information supplied with this limiting does not qualify on the exemption stated in Section 113-05(0), Florida Statutes. Further certify that the information supplied in the information state in Section 113-05(0), Florida Statutes, Further Certify that the information indicated on this report or supplied ender 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: