2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000076694

Entity Name: MONTAL'S UPHOLSTERY INC.

FILED May 01, 2002 8:00 AM Secretary of State

Current Principal Place of Business: New Principal Place of Business: 4734 OKEECHOBEE BLVD WEST PALM BEACH, FL 33417 **Current Mailing Address: New Mailing Address:** 4734 OKEECHOBEE BLVD WEST PALM BEACH, FL 33417 FEI Number: 65-1132525 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BELLANGE, MONTAL 4734 OKEECHOBEE BLVD WEST PALM BEACH, FL 33417 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: Electronic Signature of Registered Agent Date This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X). Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change (X) Addition BELLANGE, MONTAL Name: Name: 4734 OKEECHOBEE BLVD Address: Address: City-St-Zip: City-St-Zip: WEST PALM BEACH, FL 33417 Title: () Change (X) Addition Title: () Delete COO Name: Name: BELLANGE, MONTAL 4734 OKEECHOBEE BLVD. Address: Address: WEST PALM BEACH, FL 33417 City-St-Zip: City-St-Zip: Title: () Delete Title: V P () Change (X) Addition MARIANNE, BELLANGE Name: Name: 4734 OKEECHOREE BLVD Address Address: City-St-Zip: City-St-Zip: WEST PALM BEACH, FL 33417 Title: () Delete Title: **PRES** () Change (X) Addition BELLANGE, MONTAL Name: Name: Address: Address: 4734 OKEECHOBEE BLVD City-St-Zip: City-St-Zip: WEST PALM BEACH, FL 33417 Title: Title: TRES () Change (X) Addition () Delete Name: Name: BELLANGE, MONTAL 4734 OKEECHOBEE BLVD. Address: Address: City-St-Zip: City-St-Zip: WEST PALM BEACH, FL 33417 Title: () Delete Title: SEC. () Change (X) Addition BELLANGE, MARIANNE Name: Name: 4734 OKEECHOBEE BLVD Address: Address: City-St-Zip: City-St-Zip: WEST PALM BEACH, FL 33417

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MONTAL BELLANGE PRES 05/01/2002