2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

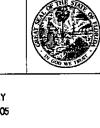
Mailing Address

P01000091976 **DOCUMENT #**

1. Entity Name

Principal Place of Business

ANTIQUES & ORIENTAL RUGS, INC.



FILED Jan 06, 2003 8:00 am Secretary of State 01-06-2003 90078 037 ***150.00

	Dixie Highway Beach FL 33405	WEST PALM BEACH F				
2. Principal Place of Business		3. Mailing Address				
Suite, Apt. #, etc.		Suite, Apt. #, etc.		☐ CHECK HERE IF MAKI	☐ CHECK HERE IF MAKING CHANGES	
City & State		City & State		4. FEI Number 65-1151377	Applied For Not Applicable	
Zip	Country	Zip	Country	5. Certificate of Status Desired	\$8.75 Additional Fee Required	
	6. Name and Address of Currer	nt Registered Agent		7. Name and Address of New Registere	d Agent	
MALEKAN, JOSEPH 3635 SOUTH DIXIE HIGHWAY			Name Street Addres	Name Street Address (P.O. Box Number is Not Acceptable)		
	LM BEACH FL 33405		City	F	Zip Code	
the obligati	named entity submits this statement ions of registered agent. Signature, typed or printed name of registered age ILE NOW!!! FEE IS \$150.00		g its registered office or regis	stered agent, or both, in the State of Florida. Laulied when reinstating) 9. Election Campaign Financing		
	r May 1, 2003 Fee will be \$550.0 c Payable to Florida Department			Trust Fund Contribution.	Added to Fees	
10.		ID DIRECTORS	11.	ADDITIONS/CHANGES TO OFFICERS A		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MALEKAN, JOSEPH 3635 SOUTH DIXIE HIGHWAY WEST PALM BEACH FL 33405	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition	
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TITLE NAME STREET ADDRESS		☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - 71P		☐ Change ☐ Addition	

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:

Daytime Phone #