2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR) P01000092297 **DOCUMENT #**

1. Entity Name

FIBEROPTIC LIGHTING SOLUTIONS. INC.

FILED Apr 28, 2003 8:00 am Secretary of State

04-28-2003 90516 025 ***158.75

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Principal Place of Business 1950 FIRST AVENUE NORTH. SUITE 100 ST PETERSBURG FL 33713			Mailing Address 1950 FIRST AVENUE NORTH. SUITE 100 ST PETERSBURG FL 33713			-						
											(1))) (1)) (1))	
2. Principal Place of Business		3. Mailing Address										
Suite, Apt. #, etc.		Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES							
City & Sta	te	City & State			4. F	FEI Number 65-37	49412		 	oplied For	7	
Zip	Country	Zip		Country		5. (Certificate of Status [Desired		.75 Add	ditional	 -
	6. Name and Address of Current	Registere	d Agent			7. N	Name and Address	of New Reg	istered Age	nt		Ĭ
				Name								1
SMITH, ERIC A 1950 FIRST AVENUE NORTH, SUITE 100			S			Street Address (P.O. Box Number is Not Acceptable)						
	SBURG FL 33713											
				City					FL	Zip Cod	e	1
	named entity submits this statement fo tions of registered agent.	the purpo	ose of changing its req	gistered office of	or registere	ed age	ent, or both, in the St	ate of Floric	ia. I am fam	iliar with,	and accept	1
CICALATURE												
SIGNATURE	Signature, typechos printed name of registered agent a	nd title if appli	cable. (NOTE: Re	agistered Agent signa	ature required	when re.	instating)		DATE			ļ
F	ILE NOW!!! FEE IS \$150.00			•							_	1
After May 1, 2003 Fee will be \$550.00 Make Chack Payable to Florida Department of State							9. Election Cam Trust Fund Co	. •	ncing		0 May Be I to Fees	
10.	: OFFICERS AND	DIRECTOR	RS	11.	_		DITIONS/CHANGES	TO OFFICE	ERS AND DI	RECTOR	S IN 11],
TITLE	PVTS		☐ Delete	TITLE	PV	75	· · · · · · ·		×	Change	☐ Addition	5
NAME STREET ADDRESS	SMITH, ERIC A 10263 GANDY BLVD. N. #607			NAME STREET ADDRESS	346	n, t	eric M.	Blud	#19	,		1
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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