2002 UNIFORM BUSINESS REPORT (UBR) P01000095623 **DOCUMENT #** 1. Entity Name UNIVERSAL COLORS, INC. Principal Place of Business Mailing Address 5487 MAULE WAY 720 LOCUST STREET SUITE 50 WEST PALM BEACH FL 33405

FILED May 19, 2002 8:00 am § Secretary of State

05-19-2002 90034 031 ***150.00



| WEST PALM BEACH FL 33405 City 8. The above named entity submits this statement for the purpose of changing its registered office or registered above named entity submits this statement for the purpose of changing its registered office or registered above named entity submits this statement for the purpose of changing its registered office or registered above named entity submits this statement for the purpose of changing its registered office or registered above named entity submits this statement for the purpose of changing its registered office or registered above named entity submits this statement for the purpose of changing its registered office or registered above named entity submits this statement for the purpose of changing its registered office or registered above named entity submits this statement for the purpose of changing its registered office or registered above named entity submits this statement for the purpose of changing its registered office or registered above named entity submits this statement for the purpose of changing its registered office or registered above named entity submits this statement for the purpose of changing its registered office or registered above named entity submits this statement for the purpose of changing its registered office or registered above named entity submits this statement for the purpose of changing its registered above named entity submits the purpose of changing its registered above named entity submits the purpose of changing its registered above named entity submits the purpose of changing its registered above named entity submits the purpose of changing its registered above named entity submits the purpose of changing its registered above named entity submits the purpose of changing its registered above named entity submits the purpose of changing its registered above named entity submits the purpose of changing its registered above named entity submits the purpose of changing its registered above named entity submits the purpose of changing its r | | | | DO NOT WRITE IN THIS SPACE | | | |
|--|--|--|--|--|---------------|----------------------|------------------------|
| 1113 48th street 720 locust st. | | | | | | | |
| Man | gonia Park Fl | Country | 4. FEI Number Applied For Not Applicable 5. Certificate of Status Desired \$8.75 Additional | | | | |
| - 35 | 6. Name and Address of Current Re | 33405 | <u> </u> | | | ee Requir | ed |
| | | giotorea Agent | Name | 7. Name and Address of New F | egistered A | gent | <u> </u> |
| 720 LOC | ust street | Street Address | Street Address (P.O. Box Number is Not Acceptable) | | | | |
| | | | | | FL | Zip Co | de e |
| 8. The above | named entity submits this statement for th | e purpose of changing its | egistered office or registe | ered agent, or both, in the State of Fic | rida. | | - |
| - | Signature, typed or printed name of registered agent and | itle if applicable. (NOTE: | Registered Agent signature require | d when reinstating) | DATE | | |
| Tax filing requirement and elects to do so. (See criteria on back) After M Make Che | | | 2 Fee will be \$550.00 | 10. Election Campaign Finance Trust Fund Contribution | _ | \$5.0 Adde | 00 May Be d to Fees |
| | | ECTORS | 12. | ADDITIONS/CHANGES TO OFFI | CERS AND D | IRECTOR | S IN 11 |
| NAME | RIVERA, SERGIO 720 LOCUST STREET | Delete | NAME STREET ADDRESS | | | Change | ☐ Addition |
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| indicated o | rtify that the information supplied with this in this report or supplemental report is true | tiling does not qualify for the and accurate and that my: | e exemption stated in Sec | ction 119.07(3)(i), Florida Statutes. I fu | rther certify | that the inf | ormation |

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 11 or Block 12 if chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR