2002 UNIFORM BUSINESS REPORT (UBR)

Sep 16, 2002 8:00 am Secretary of State P01000097955 DOCUMENT # 1. Entity Name 09-16-2002 90106 048 ***550.00 HIGH RIDGE FLOORING, INC. Principal Place of Business Mailing Address 1014 S 14TH COURT 980903 1014 S 14TH COURT LANTANA FL 33462 LANTANA FL 33462 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc Suite, Apt. #, etc. Applied For City & State City & State -40-5351 Not Applicable Zip Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MURPHY, RICHARD Street Address (P.O. Box Number is Not Acceptable) 1014 S 14TH COURT LANTANA FL 33462 Zip Code City 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. SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$550.00 10. Election Campaign Financing \$5.00 May Be After September 13, 2002 Fee will be \$750.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. CR2E034 (4/02) Change Change Addition TITLE Delete TITLE MURPHY, RICHARD NAME NAME 1014 S 14TH COURT STREET ADDRESS STREET ADDRESS LANTANA FL 33462 CITY-ST-ZIP CITY-ST-7IP Change ☐ Addition D۷ ☐ Delete TITI F TITLE NAME VALERI, ANTHONY NAME STREET ADDRESS STREET ADDRESS 1014 S 14TH COURT CITY-ST-ZIP CITY-ST-ZIP LANTANA FL 33462 ☐ Change ☐ Addition TITLE ☐ Delete TITLE DTS MURPHY, DIANE NAME STREET ADDRESS STREET ADDRESS 1014 S 14TH COURT CITY-ST-ZIP CITY-ST-ZIP LANTANA FL 33462 Change Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address; with all other like empowered.

SIGNATURE:

FILED