FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P020000 7882 1. Entity Name

Lois Millwork, INC.

Apr 16, 2003 8:00 am Secretary of State 04-16-2003 90168 024 ***150.00

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DO NOT WRITE IN THIS SPACE						
2. Principal Place of Business 22/3 W 53 Place 3. Mailing Address 22/3			1.1	C2 71		
Suite, Apt.	Suite, Apt. #, etc.	22/3 W 53 1/2ce e, Apt. #, etc.		DO NOT WRITE IN THIS SPACE		
City & State Hrinlesh FL		City & State Hroleph FL			4. FEI Number 03 - 04/0/3/ Applied For Not Applied be	
33016	Country	^{Zip} 330%	Coun	USA	5. Certificate of Status Desired \$8.75 Additional Fee Required	
			L		7. Name and Address of Current Registered Agent	
			ىنجىج	Namo-x	Boeis Lois	
DO NOT WRITE				Street Address (P.O. Box Number is Not Acceptable)		
IN THIS SPACE				22	2/3 W 53 Place	
HE US		•••		City His	lesh FL Zip Gode 330%	
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.						
SIGNATURE Signature, typed or printed name of registered agent and title it applicable. (NOTE: Registered Agent' signature required when reinstalting) DATE						
O. This saves		January 1 - N			704	
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) When the satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)				s \$550.00 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	10. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees	
11.	OFFICERS AND D	IRECTORS		······································	The second of th	
TITLE NAME STREET ADDRESS CATY-ST-ZIP	Pd. Lois, Boais 2213 W 53 Plage Hraleah Fl 33016		•	. 1		
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13. Thereby certify that the information supplied with this filling 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 on an attachment with an address, with all other like empowered.						

PRESIDENT