

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 07, 2003 8:00 am
Secretary of State

03-07-2003 90070 024 ***150.00

DOCUMENT # P02000039463

1. Entity Name
DOORS & HARDWARE U.S.A INC.



Principal Place of Business
**101 SW 15TH STREET
FORT LAUDERDALE FL 33315**

Mailing Address
**101 SW 15TH STREET
FORT LAUDERDALE FL 33315**



2. Principal Place of Business
10026 NW 46th Street
Suite, Apt. #, etc.

3. Mailing Address
10026 NW 46th Street
Suite, Apt. #, etc.

City & State
Sunrise FL

City & State
Sunrise FL

4. FEI Number
743038179

Applied For
Not Applicable

Zip
33351 Country
Broward

Zip
33351 Country
Broward

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**FINKE, STEFAN
1335 SW 122TH WAY
PEMBROKE PINES FL 33025**

Name
Samr
Street Address (P.O. Box Number is Not Acceptable)

City
FL Zip Code

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 **S. Stefan Finke President** **03/03/03**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
P ☐ Delete
NAME
FINKE, STEFAN
STREET ADDRESS
1335 SW 122TH WAY
CITY-ST-ZIP
PEMBROKE PINES FL 33025

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
V ☒ Delete
NAME
PALENCIA, HERIBERTO
STREET ADDRESS
7529 HAYES STREET
CITY-ST-ZIP
HOLLYWOOD FL 33024

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
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NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

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: **S. Stefan Finke President** **03/03/03** **954 214 9867**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)