

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

FILED
Apr 21, 2003 8:00 am
Secretary of State

04-21-2003 91211 001 ***150.00

DOCUMENT # *P02000049068*

1. Entity Name

BLAIR Custom WOODWORKING + HOME DECOR, INC

DO NOT WRITE IN THIS SPACE

11005146

2. Principal Place of Business

4782 NE 11TH AVE

3. Mailing Address

4782 NE 11TH AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

OAKLAND PARK, FL

City & State

OAKLAND PARK, FL

4. FEI Number

02-0595737

Applied For

Not Applicable

Zip

33334

Country

Zip

33334

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

WOLFE, LARRY

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

2514 HOLLYWOOD BLVD, # 508

City

HOLLYWOOD

FL

Zip Code

33020

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 if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
*D
BLAIR, GLENDON
4782 NE 11TH AVE
OAKLAND PARK, FL 33334*

TITLE
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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 on an attachment with an address, with all other like empowered.

SIGNATURE: *Glendon Blair*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/16/03

Date

Daytime Phone #

CR2034B (12/01)