2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR)

P02000067233 **DOCUMENT#**

1. Entity Name MAINAH CARPENTRY INC



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

04-21-2003 91068 017 ***150.00

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Type Country Zip Country 5. Certificate of Status Desired Status D	Suite, Apt. #, etc.			Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES			
S. Certification of the Registered Agent NOYES, ESTHER J 7 FIATWOOD LANE VENUS FL 33880 City City City FL Zip Code 8. The above named entity submiss this storement for the purpose of changing its registered different registered agent, or both, in the State of Florida, I am familiar with, and accept the onligations of registered agent, or both, in the State of Florida, I am familiar with, and accept the onligations of registered agent, or both, in the State of Florida, I am familiar with, and accept the onligations of registered agent, or both, in the State of Florida, I am familiar with, and accept the onligations of registered agent, or both, in the State of Florida, I am familiar with, and accept the onligations of registered agent, or both, in the State of Florida, I am familiar with, and accept the onligations of registered agent, or both, in the State of Florida, I am familiar with, and accept the onligations of registered agent, or both, in the State of Florida, I am familiar with, and accept the onligations of registered agent, or both, in the State of Florida, I am familiar with, and accept the onligation of registered agent, or both, in the State of Florida, I am familiar with, and accept the onligation of registered agent, or both, in the State of Florida, I am familiar with, and accept the onligation of registered agent, or both, in the State of Florida, I am familiar with, and accept the onligation of registered agent, or both, in the State of Florida, I am familiar with, and accept the onligation of registered agent, or both, in the State of Florida, I am familiar with, and accept the onligation of registered agent, or both, in the State of Florida, I am familiar with, and accept the onligation of registered agent, or both, in the State of Florida, I am familiar with, and accept the onligation of registered agent, or both, in the State of Florida, I am familiar with, and accept the onligation of registered agent, or both, in the State of Florida, I am familiar with, and accept the onligatio	City & State			City & State						
NOYES, ESTHER J 77 FLATWOOD LANE VENUS FL 33960 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 Siste of Florida. I am familiar with, and accept the obligations of registered agent, or both. In the Siste of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Sometime full of registered agent, or both. In the Siste of Florida. I am familiar with, and accept the obligations of registered agent, or both. In the Siste of Florida. I am familiar with, and accept the obligations of registered agent, or both. In the Siste of Florida. I am familiar with, and accept the obligations of registered agent, or both. In the Siste of Florida. I am familiar with, and accept the obligations of registered agent, or both. In the Siste of Florida. I am familiar with, and accept the obligations of registered agent, or both. In the Siste of Florida. I am familiar with, and accept the obligations of registered agent, or both. In the Siste of Florida. I am familiar with, and accept the obligations of registered agent, or both. In the Siste of Florida. I am familiar with, and accept the obligations of registered agent, or both. In the Siste of Florida. I am familiar with, and accept the obligations of registered agent, or both. In the Siste of Florida. I am familiar with, and accept the obligations of registered agent, or both. In the Siste of Florida. I am familiar with, and accept the obligations of registered agent, or both. In the Siste of Florida. I am familiar with, and accept the obligations of registered agent, or both. In the Siste of Florida. I am familiar with, and accept the obligations of registered agent, or both. In the Siste of Florida. I am familiar with, and accept the obligations of registered agent, or both. In the Siste of Florida. I am familiar with, and accept the obligations of registered agent, or both. In the Siste of Florida. I am familiar with, and accept the obligation	Zip	Coun	try 2			5.	Certificate of Status Desired			
NOYES, ESTHER J 77 FLATWOOD LANE VENUS FL 33960 City City FL Zip Code 8. The above named entity submits this statement for the purpose of changing its registered adject or registered agent, or both, in the State of Florids. I am familiar with, and accept the objections of registered agent. SIGNATURE SIGNATURE FILE THOUGHLI-REFELS, 61-69,000 Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO DIFFICENS AND DIRECTORS IN 11 TILE NAME ONYES, ESTHER J TILE NAME STREET AUGRESS ONY-51-2P TILE STREET AUGRESS ONY-51-2P TILE STREET AUGRESS ONY-51-2P TILE STREET AUGRESS O	6. Name and Address of Current Reg			tered Agent		7.	Name and Address of New Reg	istered Agent		
8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. ### Signature PRE-NOWIN-FISE-IS-S150-00	77 FLATWOOD									
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12. Thereby 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		~	<u> </u>	ويساميه الرواسيسي			بالمرابط بمصوف في الله		·	
	12. hereby certify	that the informa	ition supplied with this fill	ing does not qualify for t	he exemption sta	ted in Section	119.07(3)(i), Florida Statutes. I fu	rther certify that the ir	nformation	

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: