## 2003 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# P02000101662

Address:

City-St-Zip:

Entity Name: MERIDIEN ACCENTS, INC.

FILED Apr 21, 2003 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** C/O LEE C SCHMACHTENBERG 5769 NW 7TH ST 1533 SUNSET DRIVE SUITE 201 #159 CORAL GABLES, FL 33143 MIAMI, FL 33126 **Current Mailing Address: New Mailing Address:** C/O LEE C SCHMACHTENBERG 5769 NW 7TH ST 1533 SUNSET DRIVE SUITE 201 #159 CORAL GABLES, FL 33143 MIAMI, FL 33126 FEI Number: 81-0573522 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SCHMACHTENBERG, LEE C MURRAY, PATRICIA B 1533 SUNSET DRIVE SUITE 201 251 CRANDON BLVD CORAL GABLES, FL 33143 #441 KEY BISCAYNE, FL 33149 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: PATRICIA BARBER MURRAY 04/21/2003 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: ( ) Change (X) Addition CASTRO, RAUL M Name: Name: PROLONGACION EMPERADORES NO 262 Address: Address: City-St-Zip: City-St-Zip: MEXICO, DF 03320 MX ( ) Delete Title: Title: ( ) Change (X) Addition Name: Name: ENRIQUEZ. FELIPE BOSQUE DE JACARANDAS NO 693 Address Address: MEXICO, DF 11700 MX City-St-Zip: City-St-Zip: Title: Title: () Delete MS ( ) Change (X) Addition MURRAY, PATRICIA B Name: Name: 251 CRANDON BLVD, #441 Address Address: City-St-Zip: City-St-Zip: KEY BISCAYNE, FL 33149 Title: () Delete Title: MR. ( ) Change (X) Addition MURRAY, HUGH D Name: Name: Address: Address: 251 CRANDON BLVD, #441 City-St-Zip: City-St-Zip: KEY BISCAYNE, FL 33149 Title: Title: ( ) Change (X) Addition () Delete ENRIQUEZ, JEAN C Name: Name:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: PATRICIA BARBER MURRAY MS 04/21/2003

CERRADA DE ARTEAGA Y SALAZAR NO 104

MEXICO, DF 05500 MX