UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P05000143059

1. Entity Name

CUSTOM INTERIOR CONTRACTORS CORP.



FILED

06 AUG -8 PH 1: 25

SECRETARI A TATE
TALLAHASSEE, FLORIDA

[OO N	OT WRITE	IN THIS S	PAC	E				
2. Principal Pl			3. Mailing Address 13040 SW 95th Avenue						
13040 SW 95th Avenue Suite, Apr. #, etc.			Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE		
City & State Miami, Florida			City & State Miami, Florida			4. FE	20-3660986	Applied For Not Applicable	
Zip 33176		Country	Zip 33176	Coun	try	5 . Ce		3.75 Additional e Required	
					Nama		ne and Address of Current Registered A	gent	
DO NOT WRITE					SF	Name SPIEGEL & UTRERA, P.A.			
				Street Address		ress (P.O. Bo	s (P.O. Box Number is Not Acceptable)		
IN THIS SP			PACE		1840 Southwest 22 Street, 4th Floor				
					^{City} Miar	mi	FL	Zip Code 33145	
8. The above	named entitions of regist	y submits this statement f	or the purpose of changing i	its register	ed office or re	gistered age	nt, or both, in the State of Florida. I am fam	iliar with, and accept	
	a to to grad								
SIGNATURE .	Signature, typed	or printed name of registered ager	n and tile if applicable (No	DTE Registere	d Agent signature r	required when rein	stating) DATE		
		ay 1 Fee is \$150.00					9. Election Campaign Financing	#5.00	
	Amended	1, Fee is \$550.00 I UBR is \$61.25 o Florida Department c	of State				Trust Fund Contribution.	\$5.00 May Be Added to Fees	
10.		OFFICERS AND	DIRECTORS						
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TITLE	VSTD		···	πn	E				
NAME		Lorena K.		NAM	-				
STREET ADDRESS CITY-ST-ZIP		W 95th Avenue Iorida 33176			ET ADDRESS -S1-ZIP				
TITLE	iviiariii, r	iorida 33170	, , , , , , , , , , , , , , , , , , ,	FITL					
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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 eath; 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 on an attachment with an address, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATIFE:

Luis C. Menocal, Pres.

8/4/00

784.290.8961

Dayton Proce

AFFIDAVIT IN SUPPORT OF REQUEST TO WAIVE THE FLORIDA DEPARTMENT OF STATE CORPORATE REINSTATEMENT FEES

STATE OF FLORIDA)	
)	
COUNTY OF MIAMI DADE)	

- 1. Luis C. Menocal is the President of CUSTOM INTERIOR CONTRACTORS CORP., a Florida corporation, (hereinafter "Corporation").
- 2. That the Corporation failed to file its 2006 Annual Report or pay the 2006 Annual Report filing fee within the time prescribed by Florida Statutes Chapter 607 because:
 - 2.1 the written notice and requirements for filing the Annual Report and pay the Annual Report fee to the Florida Department of State was never received by the Corporation; and,
 - 2.2 the written notice was never received by the Corporation or its Registered Agent that the Florida Department of State was commencing a procedure to administratively dissolve the Corporation.
- 3. The Corporation requests the Florida Department of State waive the late fee for the Corporation upon the payment of its 2006 Annual Report fee and the filing of its 2006 Annual Report, which are presented simultaneously with this Affidavit.
- 4. CUSTOM INTERIOR CONTRACTORS CORP. satisfies the requirements of the Florida Statutes 607.0401.
- 5. No further ground or grounds exist for the administrative dissolution of the Corporation.

Dated: 04 day of August, 2006

FURTHER, AFFIANT SAYETH NOT

CUSTOM INTERIOR CONTRACTORS CORP.

SWORN AND SUBSCRIBED

before me this ____ day of August, 2006

Notary Public, State of Florida at Large

Printed Name: ANNERY M. Laper

Commission Expires:_

