2000 UNIFORM BUSINESS REPORT (UBR) **FILED** May 04, 2000 8:00 am Secretary of State **DOCUMENT # P09249** 1. Entity Name DECOMA INVESTMENT, INC. II 05-04-2000 90130 038 ***150.00 Principal Place of Business Mailing Address 450 E LAS OLAS BLVD CC E LAS OLAS BLVD STE 1400 TF 1400 FT LAUDERDALE FL 33301-4206 T LAUDERDALE FL 33301 US 2. Principal Place of Business 3. Mailing Address 501 E. Camino Real O. Box 5025 Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Corporate Office Corporate Office City & State City & State 4. FEI Number Applied For 76-0156358 Not Applicable Boca Raton, FI Boca Raton, FL Country Country \$8.75 Additional Zip Zip 5. Certificate of Status Desired Fee Required 33432 <u> 33431</u> 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name AMERICAN INFORMATION SERVICES, INC. Street Address (P.O. Box Number is Not Acceptable) 1 S.E. 3RD AVENUE 27TH FLOOR MIAMI FL 33131 Zip Code City FL 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 DATE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing **\$5.00** May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. DP CR2E034 (9/99 ☐ Delete TITLE Change Addition TITLE ROCHON, RICHARD C NAME NAME 450 E. OLAS BLVD., #1500 STREET ADDRESS STREET ADDRESS FT. LAUDERDALE FL 33301 CITY-ST-ZIP CITY-ST-ZIP **VPS** ☐ Change Delete TIT1 F ☐ Addition TITLE HANDLEY, RICHARD L NAME NAME 450 E. LAS OLAS BLVD., #1500 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FT. LAUDERDALE FL 33301 CITY-ST-7IP X Change ☐ Addition Delete TITLE PIERCE, WILLIAM M NAME NAME 450 E LAS OLAS BLVD 1400 STREET ADDRESS 501 E. Camino Real STREET ADDRESS CITY-ST-ZIP Boca Raton, FL CITY-ST-ZIP FT. LAUDERDALE FL 33301 **VPT** X Change ☐ Addition Delete TITLE TITLE DAURIA, STEVE M NAME NAME 501 E. Camino Real 450 E LAS OLAS BLVD 1400 STREET ADDRESS STREET ADDRESS Boca Raton, FL CITY-ST-ZIP FT. LAUDERDALE FL 33301 CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition Delete TITI F TITLE NAME NAME STREET ADDRESS STREET ADDRESS

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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

Steven M. Dauria

E AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-28-1

561-447-5300

Daytime Phon