2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P29960 1. Entity Name PORCELANITE, INC.						Feb 21, 2002 8:00 am Secretary of State 02-21-2002 90104 017 ***150.00					
Principal Plac	e of Business	Mailing Address									
1184 W CORF	PORATE DR	1184 W CORPORATE DR ARLINGTON TX 76006					·				
O Dein ein al D	leas of Divisions	Lo Marifera Antalana									
z. Principal P	lace of Business	3. Mailing Address				ı	(98)(89) ((0)(816) (0)(0)(0)(6 (1111 - 8 5 11 - Bijo li - B f8) B(B() B(B()	##### 019 11 78 1 1	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE					
City & Stat	е	City & State				. FEI N	umber 56-063902 8	3		pplied For ot Applicable	
Zip Country		Zip	try	5	. Certif	cate of Status Desired		88.75 Add			
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent							
					Name						
CORPORATION SERVICE COMPANY					Street Address (P.O. Box Number is Not Acceptable)						
1201 HAYES STREET TALLAHASSEE FL 32301											
TALLAHAGGEE PL 32301				City					Zip Cod	le	
		 						FL			
	named entity submits this statement for	the purpose of changing its	register	ed office or	r registered	agent, d	or both, in the State of Flo	orida.			
signature.	Signature, typed or printed name of registered agent an	nd title if applicable. (NOT	E: Registere	d Agent signat	ure required whe	en reinstatir	g)	DATE			
9. This corpo	pration is eligible to satisfy its Intangible	FILE NOW!	!! FEE	IS \$150.	00	Π					
Tax filing requirement and elects to do so. After May 1, 2002 Fee				will be \$5	50.00	10	 Election Campaign Fir Trust Fund Contribution 			00 May Be	
•	ia on back)	Make Check Payab		epartmen		ADDITIO	NO CHANGES TO SE	IOCEDO ANIO I	DIDECTOR	00 (5) 44	
11.	OFFICERS AND D	Delete Delete	12.	:	·	ADDITK	DNS/CHANGES TO OFF		□ Change	Addition	
NAME STREET ADDRESS CITY-ST-ZIP	ABOMRAD, ALEJANDRO BOOZUES DE CIRVELOS/NO 130-		NAM STRE							7,40,101	
TITLE	BOOQUE DE LUS LANAS	Delete	TITLE		Presid	0 n +			☐ Change	Addition	
NAME STREET ADDRESS CITY-ST-ZIP	CUTLER, RONALD 1184 W CORPORATE DR	LED DONNE	NAM STRE		Felix	Aau	rporate Dr.				
TITLE	ARLINGTON TX 76006	☐ Delete	TITLE		Arlingt	on /	TX 76006			Addition	
NAME STREET ADDRESS	LISEA, JOSE L 1184 W CORPORATE DR		NAM STRE	E Et address							
CITY-ST-ZIP	ARLINGTON TX 76006	.	-	-ST-ZIP							
TITLE . NAME	AS SANCHEZ, ALEJANDRO	☐ Delete	TITLE						☐ Change	☐ Addition	
STREET ADDRESS	1184 W CORPORATE DR			ET ADDRESS							
CITY-ST-ZIP	ARLINGTON TX 76006		CITY	-ST-ZIP							
TITLE NAME	AS_ == Gutierrez, Humberto	Delete	TITLE						☐ Change	☐ Addition	
STREET ADDRESS	1184 W CORPORATE DR			et address							
CITY-ST-ZIP	ARLINGTON TX 76006		CITY	-ST-ZIP							
TITLE		☐ Delete	TITLE						☐ Change	☐ Addition	
NAME STREET ADDRESS				ET ADDRESS							
CITY-ST-ZIP			CITY	-ST-ZIP							
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.											
SIGNATURE: SIGNATURE AND TYPED PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daylime Phone #											