

## 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000057753

1. Entity Name

LAMPS AND SHADES BY DANOR, INC.

FILED  
Mar 13, 2002 8:00 am  
Secretary of State

03-13-2002 90077 047 \*\*\*150.00

0406100 AV

Principal Place of Business  
5501 N. FEDERAL HWY  
BOCA RATON FL 33487  
US

Mailing Address  
5501 N. FEDERAL HWY  
BOCA RATON FL 33487  
US

2. Principal Place of Business  
Suite, Apt. #, etc.

3. Mailing Address  
Suite, Apt. #, etc.

City & State  
Zip \_\_\_\_\_ Country \_\_\_\_\_

City & State  
Zip \_\_\_\_\_ Country \_\_\_\_\_

6. Name and Address of Current Registered Agent  
ROSENTHAL, STUART S ESQ  
404 EAST ATLANTIC BLVD  
SUITE 101  
POMPANO BEACH FL 33060

4. FEI Number  
**59-1939296**

Applied For
Not Applicable

5. Certificate of Status Desired  **\$8.75** Additional Fee Required

7. Name and Address of New Registered Agent  
Name \_\_\_\_\_  
Street Address (P.O. Box Number is Not Acceptable) \_\_\_\_\_  
City \_\_\_\_\_ Zip Code **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 *Gladys Youlovsky V.P.* DATE *3/1/02*  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so.  **FILE NOW!!! FEE IS \$150.00**  
After May 1, 2002 Fee will be \$550.00  
(See criteria on back)  **Make Check Payable to Department of State**

10. Election Campaign Financing  **\$5.00** May Be  
Trust Fund Contribution  **Added to Fees**

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD YOULOVSKY, TED 5501 N. FEDERAL HIGHWAY BOCA RATON FL 33487	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPTD YOULOVSKY, GLADYS 5501 N. FEDERAL HIGHWAY BOCA RATON FL 33487	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: *Gladys Youlovsky VP* Date *03/01/02* Daytime Phone # *561-499-0670*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/01)