

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

May 01, 2001 8:00 am
Secretary of State

05-01-2001 90050 013 ***150.00

DOCUMENT # P93000058434

1. Entity Name
CHANGING SHEDS, INC.

Principal Place of Business

1800 N.E. 114TH ST.
#706
MIAMI FL 33181

Mailing Address

1800 N.E. 114TH ST.
#706
MIAMI FL 33181

2. Principal Place of Business

1481 S.W. 65TH WAY

Suite, Apt. #, etc.

3. Mailing Address

1481 S.W. 65TH WAY

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

BOCA RATON FLORIDA

City & State

BOCA RATON FLORIDA

4. FEI Number

65-0459352

Applied For

Not Applicable

Zip

33428

Country

USA

Zip

33428

Country

U.S.A

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

FERGUSON, RONALD W
1481 SW 65TH WAY
BOCA RATON FL 33428

7. Name and Address of New Registered Agent

Name KATHRYN M. PFEIL-FERGUSON

Street Address (P.O. Box Number is Not Acceptable)

1481 S.W. 65TH WAY
BOCA RATON FL. 33428

City

FL

Zip Code

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

Ronald Ferguson

RONALD FERGUSON

2/28/01

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when re-certifying)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE P
NAME FERGUSON-PFEIL, KATHRYN M
STREET ADDRESS 1481 SW 65TH WAY
CITY-ST-ZIP BOCA RATON FL 33428 ☐ Delete

TITLE VP
NAME FERGUSON, RONALD
STREET ADDRESS 1481 SW 65TH WAY
CITY-ST-ZIP BOCA RATON FL 33428 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
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CITY-ST-ZIP ☐ Delete

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CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE ☐ Change ☐ 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 another like empowered.

SIGNATURE:

Kathryn M. Pfeil-Ferguson

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

KATHRYN M. PFEIL-FERGUSON

2/28/01

Date

(561) 218-3074

Daytime Phone #

CR2E034 (10/00)