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2002 UNIFORM BUSINESS REPORT (UBR)

Mar 25, 2002 8:00 am P94000087544 **DOCUMENT #** Secretary of State 1. Entity Name 03-25-2002 90054 048 ***150.00 CATENA BUILDING INDUSTRY USA, INC. Principal Place of Business Mailing Address 924 5TH ST W 924 5TH ST W PALMETTO FL 34221 PALMETTO FL 34221 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0537044 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent VAN DER KOLK, HANS Street Address (P.O. Box Number is Not Acceptable) 1398 BAYSHORE DRIVE TERRA CEIA FL 34250 City 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 egistered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. - Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS - ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 (9/01) TITLE TITLE ☐ Delete VAN DER KOLK, HANS NAME NAME 1398 BAYSHORE DRIVE STREET ADDRESS STREET ADDRESS 924 TERRA CEIA FL 34250 PL 34221. CITY-ST-ZIP CITY-ST-ZIP PALMETTO Delete ☐ Change ☐ Addition TITLE TITLE CATENA, FRANCO NAME NAME STREET ADDRESS VIA MONTEGALLO, # 45 STREET ADDRESS OSIMO (AN), ITALÝ CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Change ☐ Addition TITLE TITLE HEREMANS, RONALD NAME NAME STREET ADDRESS **EUG. WOUTERSSTRAAT 51** STREET ADDRESS 2200 HEIST OP DEN BERG CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

SIGNATURE

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 of 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