2000 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # P95000093759 1. Entity Name CUSTOM STUFF, INC.					FILED Jan 19, 2000 8:00 am Secretary of State 01-19-2000 90313 034 ***150.00					
Principal Place	e of Business	Mailing Address				01-19-2000 9	0313 03.	+ 150	.00	
1181 NORTHWE BOCA RATON F	IST 1 AVENUE. #4 FL 33431	E. #4 6								
2. Principal Pla 2. Principal Pla 2. Principal Pla 2. Principal Pla 2. Principal Pla 2. Principal Pla 2. Principal Pla 3. Principal Pla 3. Principal Pla 3. Principal Pla 4. Principal Pla 5. Principal	ace of Business W 17 the Ave	3. Mailing Address 1050 NW 17 AVR Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE					
Boca Laten, FC		City & State Raton, FC		4.	4. FEI Number 65-0624594				Applied For Not Applicable	
3348	Country	233186	Country	5.	Certificate of Si	tatus Desired		8.75 Add	itional	
	6. Name and Address of Current Re	egistered Agent		7.	Name and Add	iress of New Reg	jistered Ag	ent		
ROSE MARIE HENNESSY 1050 NW 17TH AVE BOCA RATON FL 33486			Name Street A	Name Street Address (P.O. Box Number is Not Acceptable)						
DUU	A RAIDIN FE 33400	City			FL Zip Code				)	
Tax filing re	ration is eligible to satisfy its Intangible equirement and elects to do so. (a on back) OFFICERS AND D	After MAY 1, 200 Make Check Payabl		550.00 t of State	Trust Fu	n Campaign Finar und Contribution. ANGES TO OFFIC		Added	0 May Be to Fees	
TITLE NAME STREET ADORESS CITY-ST-ZIP	VP HENNESSY, MATTHEW 4181 NORTHWEST 1 AVENUE, #4 BOCA RATON FL 33431	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP matth 1050 Boca		mnessy m Ave	3348	Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HENNESSY, ROSE MARIE 4181 NORTHWEST 1 AVENUE, # -BOCA RATON FL 33431	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Rosem 10SD N	11 7 000	ennessy	4810	Change	Addition	
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IITLE NAME Street Address City-St-Zip		Delete	TITLE NAME STREET ADDRESS CITY - ST- ZIP				×	Change	Addition	
NTLE NAME STREET ADDRESS CITY-ST-ZIP		Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				,	) Change	Addition	
TITLE NAME Street address City - St - Zip		Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP					Change	Addition	
indicated of the corr	ertify that the information supplied with t on this report or supplemental report is t poration or the receiver or trustee empoy or on an attachment with an address, with URE:	rue and accurate and that m vered to execute this report a	w cidnafuro chali i	havo the same	LIEGAL ATTRCLAS	ut made under pa	m' mai i an	п ял ошсег	oranecior	