FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

Aug 25, 2002 8:00 am Secretary of State 08-25-2002 90217 009 ***158.75

DOCUMENT # P9700000 8898

1. Entity Name

The Garage & Industrial Doors Conformation

SIGNATURE:

8-20-02 (305)888-0042

FILED

DO NOT WRITE IN THIS SPACE					
2. Principal Place of Business 7301 NW 564h St Suite, Apt. #, etc.		3. Mailing Address 7301 NW 56th ST Suite, Apt. #, etc.		DO NOT WRITE IN TH	IIS SPACE
City & State Miami, FL		City & State Higmi, FL		4. FEI Number 65- 0725808 Applied For Not Applicable	
3316	66 Dade	33166	Dade	5. Certificate of Status Desired	\$8.75 Additional Fee Required
IN THIS SPACE				7. Name and Address of Current Register 1. Name and Address of Current Regist	<u>.</u>
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 Signature, hyped or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. This corporation is eligible to satisfy its Intangible Tax filling requirement and elects to do so. After May 1, Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 Trust Fund Contribution.					
11.	OFFICERS AND E		le to Department of St	ate	
NAME STREET ADDRESS CITY-ST-ZIP	Quintana Jorge A 5825 w 25th Ct. 7 Hiakah FZ 330		TITLE NAME STREET ADDRESS CITY-ST-ZIP		CR2E034B (12/01)
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVS Quintana, Jesus 1855 W 60th St. 7 Hialeah, FL 33	P 308 3012	TITLE NAME STREET ADDRESS CITY-ST-ZIP	•	CR2E0.
TITLE NAME STREET ADDRESS CITY-ST-ZIP			TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WR	ITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			TITLE NAME STREET ADDRESS CITY-ST-ZIP	IN THIS SPA	CE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			TITLE NAME STREET ADDRESS 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 on an analysis of the corporation of the receiver of trustee empowered.					

RINTED NAME OF SIGNING OFFICER OR DIRECTOR

attachment

August 20, 2002

Division of Corporations P.O. Box 6327 Tallahassee, Fl 32314

Re: P97000008898

677242

Gentlemen:

In reference to the above mentioned corporation enclosed please find the renewal application due to the fact I never received the renewal report furnished by your office in which I could renew for 150.00.

I am enclosing 150.00 in order to renew my corporation.

Thank you,

Jorge Quintana President