

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000016080

FILED
Apr 01, 2004
Secretary of State

Entity Name: UNIFIX USA, INCORPORATED

Current Principal Place of Business:

% NATIONAL GYPSUM COMPANY TAX DEPT
2001 REXFORD ROAD
CHARLOTTE, NC 28211

New Principal Place of Business:

2001 REXFORD ROAD
CHARLOTTE, NC 28211 US

Current Mailing Address:

% NATIONAL GYPSUM COMPANY TAX DEPT
2001 REXFORD ROAD
CHARLOTTE, NC 28211

New Mailing Address:

2001 REXFORD ROAD
CHARLOTTE, NC 28211 US

FEI Number: 65-0768478

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: NELSON, THOMAS C
Address: 1423 LEXINGTON AVE
City-St-Zip: CHARLOTTE, NC 28207

Title: VP () Delete
Name: ODOM, ROBERT P
Address: 2330 HARTMILL CT.
City-St-Zip: CHARLOTTE, NC 28226

Title: VPSD () Delete
Name: SCHIFFMAN, SAMUEL A
Address: 3138 SHILLINGTON PL.
City-St-Zip: CHARLOTTE, NC 28210

Title: CFOD () Delete
Name: PARMELEE, WILLIAM D
Address: 8232 GREEN CASTLE DR
City-St-Zip: CHARLOTTE, NC 28210

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: NELSON, THOMAS C
Address: 2001 REXFORD ROAD
City-St-Zip: CHARLOTTE, NC 28211 US

Title: VP (X) Change () Addition
Name: ODOM, ROBERT P
Address: 2001 REXFORD ROAD
City-St-Zip: CHARLOTTE, NC 28211 US

Title: VPSD (X) Change () Addition
Name: SCHIFFMAN, SAMUEL A
Address: 2001 REXFORD ROAD
City-St-Zip: CHARLOTTE, NC 28211 US

Title: CFOD (X) Change () Addition
Name: PARMELEE, WILLIAM D
Address: 2001 REXFORD ROAD
City-St-Zip: CHARLOTTE, NC 28211 US

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SAMUEL A. SCHIFFMAN

VPSD

04/01/2004

Electronic Signature of Signing Officer or Director

_____ Date