2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR)													
DOCUMENT # P97000032141									FILED				
1. Entity Name LAINER'S LTD, INC.									03 JUL 28 PM :	3:40			
Dain air at Diag	a of Decision					COD WE	190		SECRETARY OF STALLAHASSEE, FLO	TATE			
Principal Place 3339 E. OAKL		Mailing Addres 3339 E. OAKL	iling Address 39 E. Oakland Park Blvd.				TALLAHASSEE, FL(DRIDA					
FORT LAUDEI	RDALE FL 333	108	FORT LAUDERDALE FL 33308 US					6 1 00 01 06 1 18 0 181 1) 1901(051(1 0 61)	II 89 III 68IB R 1	. 1818 1888 1881 '	11881 (181)		
	liege of Duck												
2. Principal Place of Business 3. Mailing Address 3. Mailing Address 3. Mailing Address 3. Mailing Address													
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES							
City & Stat		City & State Fort Lauderdale FL			_	4. FEI	Number 65-0808635			plied For at Applicable			
Zip 3330 8 Country BROWARD			Zin 🕳 🐧 Cou			untry			rtificate of Status Desired	П	\$8.75 Add		
303		BROW ARD			BR	OWAR	<u> </u>		me and Address of New Re	F	Fee Require		
6. Name and Address of Current Registered Agent Name								337 NE 325 ST					
BROWN, ELAIN J						Street Address (P.O. Box Number is Not Acceptable)							
3339 E. OAKLAND PARK BLVD. FORT LAUDERDALE FL 33308						1							
						City 👝	3337 NE 32 [™] ST						
8. The above named entity submits this statement for the purpose of changing its registered office or registered.									derdale		33	<u> 308</u>	
	ions of regist		the purpose of Ci	ianging its	registeret	J OIIICE OF IT	egistere	u agem	i, or both, in the state of Fior	iua. Lailila	ariillar witii,	and accept	
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE													
F		1 FEE IS \$550.00		· 			<u> </u>	T	<u> </u>			•	
After September 10, 2003 Fee will be \$750.00 Make Check Payable to Florida Department of State									Election Campaign Fina Trust Fund Contribution	n.	Added	O May Be I to Fees	
10.	P	OFFICERS AND			11.		- D 44		TIONS/CHANGES TO OFFI				
TITLE NAME	BROWN, E		Ш	Delete	TITLE NAME		PRE	INE	seowe _	•	Change	Addition	
STREET ADDRESS CITY-ST-ZIP	5201 NW 65TH AVE LAUDERHILL FL 33319					ET ADDRESS 1810 NE 41 2 ST -ST-ZIP FORT LAUDERDALE, FL 33308							
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CITY-ST-ZIP		TON FL 33498			CITY-S	ST-ZIP							
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STREET ADDRESS CITY-ST-ZIP					CITY-S	T ADDRESS ST-ZIP			·		_		
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NAME CIRCET ADDRESS					NAME	Apporec						ł	

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

SIGNATURE: ZALENIENIERE, REQUIRED

CITY-ST-ZIP

7/2/03 954-630-1800

PICTURE PERFECT CUSTOM FRAMING

June 20, 2003

Florida Dept. of State Division of Corporations Uniform Business Filings PO Box 1500 Tallahassee, FL 32302-1500

Dear Sir or Madam:

Due to moving both my home and my business, I missed the deadline for filing the Uniform Business Report for 2003 because I did not receive the forms.

I'm following the instructions that I was given by the customer service representative that I spoke with on the telephone when requesting the forms.

Per your instructions, I am submitting the form together with my \$150. check and would like to request your sympathy and that you permit me to file now, without penalty.

Sincerely,

Elain J. Brown President