## 2002 UNIFORM BUSINESS REPORT (UBR)

2002 UNIFORM BUSINESS REPORT (UBR)					Mar 07, 2002 8:00 a			
DOCUMENT # P9800042183  1. Entity Name CUSTOM FINISHES BY JAMES, INC.					Secretary of State 01-31-2002 90084 004 ***155.00			
Principal Place of Busine 4010 MILLES AVE WEST PALM BEACH FL US		Mailing Address 10693 NORTH MILITARY SUITE 12 PALM BEACH GARDENS US					8:8 H88: (\4	
2. Principal Place of Bus Suite, Apt. #, etc.	siness	3. Mailing Address Suite, Apt. #, etc.				ABILLABIN ABILLABIN		DE ENTRIN FILM KONT
City & State		City & State	_	4. F	El Number			pplied For
Zip	Country	Zip	Country		65-083221		N	lot Applicable
		, , , , , , , , , , , , , , , , , , ,			ertificate of Status Desired	<u> </u>	8.75 Ad	
	ne and Address of Current R	egistered Agent	. Name	7. N	ame and Address of New	Registered Ag	jent	
JONES, JAMES E	_		Street Add	iress (P.O. Bo	ox Number is Not Acceptab	le)		
10693 Ñ MILITARY #12 ₹.	TR							
PALM BEACH GAR	DENS FL 33410		City		·		T 7:- 0 - 4	
			<u> </u>	City FL Zip Code			Zip Coa	le .
8. The above named ent	my soonins this statement to	the purpose of changing its	s registered office or re	egistered age	nt, or both, in the State of F	lorida.		İ
SIGNATURE Signature, type	ed or printed name of registered agent an	d trie if applicable. (NOT	s registered office or re  E: Registered Agent signature  !!! FEE IS \$150.00	required when rein	stating)	DATE	45.0	
SIGNATURE Signature, type 9. This corporation is eli Tax (filing requirement (See criteria on back)	ed or printed name of registered agent and igible to satisfy its Intangible t and elects to do so.	FILE NOW After May 1, 20 Make Check Payal	IE: Registered Agent signature III FEE IS \$150.00 002 Fee will be \$550 ble to Department o	required when rein	staing)  10. Election Campaign Fi Trust Fund Contributi	DATE inancing	Added	00 May Be
SIGNATURE Signature, type  9. This corporation is eli Tax (iling requirement (See criteria on back)	ed or printed name of registered agent an include to satisfy its Intangible t and elects to do so.	of tried applicable. (NOT  FILE NOW  After May 1, 20  Make Check Payal  IRECTORS	TE: Registered Agent signature III FEE IS \$150.00 002 Fee will be \$550	required when rein	staing)  10. Election Campaign Fi	DATE inancing on.	Added	S IN 11
9. This corporation is eli Tax filing requirement (See criteria on back)  11.  TITLE NAME STREET ADDRESS 2423 WA	ed or printed name of registered agent and igible to satisfy its Intangible t and elects to do so.	FILE NOW After May 1, 20 Make Check Payal	IE Registered Agent signature III FEE IS \$150.00 002 Fee will be \$550 ble to Department of	required when rein	staing)  10. Election Campaign Fi Trust Fund Contributi	DATE inancing on.	Added	S IN 11
SIGNATURE  Signature, type  9. This corporation is elitax filing requirement (See criteria on back)  11.  TITLE NAME STREET ADDRESS CITY-ST-ZIP LAKE WITHLE NAME STREET ADDRESS THEE P 13  THE NAME STREET ADDRESS THEE P 13  THE NAME THEE P 13  THEE NAME THEE P 13  THEE NAME THEE P 13  THEE THEE THEE THEE THEE STREET ADDRESS THE STREET THE STREET ADDRESS THE STREET ADDRESS THE STREET ADDRESS THE STR	od or printed name of registered agent an igible to satisfy its Intangible t and elects to do so.  OFFICERS AND D  JAMES E ATERSIDE CIRCLE ORTH FL 33481	FILE NOW After May 1, 20 Make Check Payal IRECTORS Delete	IE: Registered Agent signature III FEE IS \$150.00 002 Fee will be \$550 ble to Department of 12.  TITLE NAME STREET ADDRESS	required when rein	staing)  10. Election Campaign Fi Trust Fund Contributi	inancing on. FICERS AND D	Added	S IN 11
SIGNATURE  Signature, type  9. This corporation is elit  Tax (filing requirement (See criteria on back)  11.  TITLE  NAME  STREET ADDRESS  CITY-SI-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  TITLE  NAME  STREET ADDRESS  TITLE  NAME  STREET ADDRESS  TITLE  NAME  STREET ADDRESS	igible to satisfy its Intangible t and elects to do so.  OFFICERS AND D  JAMES E ATERSIDE CIRCLE ORTH FL 33461	FILE NOW After May 1, 20 Make Check Payal IRECTORS Delete	IE: Registered Agent signature III FEE IS \$150.00 RO2 Fee will be \$550 Robert to Department of 12, TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	required when rein	staing)  10. Election Campaign Fi Trust Fund Contributi	DATE inancing on.	Added	S IN 11
SIGNATURE  Signature, type  9. This corporation is elitax filing requirement (See criteria on back)  11.  TITLE NAME STREET ADDRESS CITY-ST-ZIP LAKE WITHLE NAME STREET ADDRESS THEE P 13  THE NAME STREET ADDRESS THEE P 13  THE NAME THEE P 13  THEE NAME THEE P 13  THEE NAME THEE P 13  THEE THEE THEE THEE THEE STREET ADDRESS THE STREET THE STREET ADDRESS THE STREET ADDRESS THE STREET ADDRESS THE STR	od or printed name of registered agent an igible to satisfy its Intangible t and elects to do so.  OFFICERS AND D  JAMES E ATERSIDE CIRCLE ORTH FL 33481	FILE NOW After May 1, 20 Make Check Payal IRECTORS  Delete	IE: Registered Agent signature  III FEE IS \$150.00  102 Fee will be \$550  ble to Department of  12.  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	required when rein	staing)  10. Election Campaign Fi Trust Fund Contributi	DATE inancing on.  FICERS AND D	Addec	S IN 11 Addition Addition
SIGNATURE  Signature, type  9. This corporation is elit  Tax (iling requirement (See criteria on back)  11.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS	od or printed name of registered agent an igible to satisfy its Intangible t and elects to do so.  OFFICERS AND D  JAMES E ATERSIDE CIRCLE ORTH FL 33481	FILE NOW After May 1, 20 Make Check Payal IRECTORS  Delete	ITE Projectored Agent signature  III FEE IS \$150.00  102 Fee will be \$550  to Department of  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS	required when rein	staing)  10. Election Campaign Fi Trust Fund Contributi	DATE inancing on.  FICERS AND D	Addec	S IN 11 Addition Addition